| Fill in this information to identify your case: |                                 |                                    |
|---|---------------------------------|------------------------------------|
| United States Bankruptcy Court for the:         |                                 |                                    |
| MIDDLE DISTRICT OF PENNSYLVANIA                 | _                               |                                    |
| Case number (if known)                          | _ Chapter you are filing under: |                                    |
|   | Chapter 7                       |                                    |
|   | ☐ Chapter 11                    |                                    |
|   | ☐ Chapter 12                    |                                    |
|   | ☐ Chapter 13                    | Check if this is an amended filing |

## Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

02/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | t 1: Identify Yourself   |  |   |   |
|-----|--|--|---|---|
|     |  | About Debtor 1:                          |   | About Debtor 2 (Spouse Only in a Joint Case): |
| 1.  | Your full name   |  |   |   |
|     | Write the name that is on  | Michelle                                 |   |   |
|     | your government-issued picture identification (for example, your driver's  | First name                               |   | First name                                    |
|     | license or passport).  | Middle name                              | _ | Middle name                                   |
|     | Bring your picture   | O'Brien                                  |   |   |
|     | identification to your meeting with the trustee.   | Last name and Suffix (Sr., Jr., II, III) |   | Last name and Suffix (Sr., Jr., II, III)      |
|     |  |  |   |   |
| 2.  | All other names you have used in the last 8 years  |  |   |   |
|     | Include your married or maiden names.  |  |   |   |
| 3.  | Only the last 4 digits of<br>your Social Security<br>number or federal<br>Individual Taxpayer<br>Identification number<br>(ITIN) | xxx-xx-6310                              |   |   |

|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |
|----|--|---|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | I have not used any business name or EINs.  Business name(s)  EIN   | ☐ I have not used any business name or EINs.  Business name(s)  EIN  |
| 5. | Where you live   | 345 Penn Street   | If Debtor 2 lives at a different address:  |
|    |  | Minersville, PA 17954  Number, Street, City, State & ZIP Code   | Number, Street, City, State & ZIP Code   |
|    |  | Schuylkill  |  |
|    |  | County  | County   |
|    |  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
|    |  | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code   |
| 6. | Why you are choosing this district to file for   | Check one:  | Check one:   |
|    | bankruptcy   | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                       |
|    |  | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)  | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)   |
|    |  |   |  |

| •  | The chapter of the<br>Bankruptcy Code you are<br>choosing to file under               |       |                                 |  | of each, see <i>Notice Required by</i> page 1 and check the appropriate                             | 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box.  |
|----|---|-------|---------------------------------|--|---|--|
|    | choosing to file under  | ■ Ch  | apter 7                         |  |   |  |
|    |   | ☐ Ch  | apter 11                        |  |   |  |
|    |   | ☐ Ch  | apter 12                        |  |   |  |
|    |   | ☐ Ch  | apter 13                        |  |   |  |
| -  | How you will pay the fee  |       | about how yo                    | ou may pay. Typ<br>attorney is subr    | ically, if you are paying the fee yo  | k with the clerk's office in your local court for more details<br>surself, you may pay with cash, cashier's check, or money<br>alf, your attorney may pay with a credit card or check with |
|    |   |       |                                 |  |   | on, sign and attach the Application for Individuals to Pay   |
|    |   |       | •                               |  | s (Official Form 103A).  ived (You may request this option  | n only if you are filing for Chapter 7. By law, a judge may,   |
|    |   |       | but is not rec<br>applies to yo | uired to, waive y<br>ur family size an | our fee, and may do so only if your fee, and may do so only if you you are unable to pay the fee ir | ur income is less than 150% of the official poverty line the installments). If you choose this option, you must fill out cial Form 103B) and file it with your petition.                   |
| ١. | Have you filed for bankruptcy within the  | ■ No. |                                 |  |   |  |
|    | last 8 years?   | ☐ Yes | 3.                              |  |   |  |
|    |   |       | District                        |  | When  | Case number  |
|    |   |       | District                        |  | When  | Case number  |
|    |   |       | District                        |  | When  | Case number  |
| 0. | Are any bankruptcy<br>cases pending or being<br>filed by a spouse who is              | ■ No  |                                 |  |   |  |
|    | not filing this case with<br>you, or by a business<br>partner, or by an<br>affiliate? | □ res | <b>.</b>                        |  |   |  |
|    |   |       | Debtor                          |  |   | Relationship to you  |
|    |   |       | District                        |  | When  | Case number, if known  |
|    |   |       | Debtor                          |  |   | Relationship to you  |
|    |   |       | District                        |  | When  | Case number, if known  |
| 1. | Do you rent your residence?   | □ No. | Go to                           | line 12.                               |   |  |
|    | residence:  | ■ Yes | s. Has yo                       | our landlord obta                      | ined an eviction judgment agains  | t you?   |
|    |   |       |                                 | No. Go to line                         | 12.   |  |
|    |   |       |                                 |  |   | Judgment Against You (Form 101A) and file it with this   |

Case number (if known)

Debtor 1 Michelle O'Brien

| Jen  | Wichelle O Briefi  |            |                             |   |   |
|------|--|------------|-----------------------------|---|---|
| Pari | 3: Report About Any Bu   | ısinesses  | You Own                     | as a Sole Propriete                           | or  |
|      | Are you a sole proprietor of any full- or part-time  | ■ No.      |                             | Part 4.                                       | ··  |
|      | business?  |            | Nama                        | and location of busi                          | 200   |
|      | A colo propriotorobio io o   | ☐ Yes.     | name                        | and location of busi                          | ness  |
|      | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. |            | Name                        | of business, if any                           |   |
|      | If you have more than one sole proprietorship, use a separate sheet and attach   |            | Numb                        | er, Street, City, State                       | e & ZIP Code  |
|      | it to this petition.   |            | Check                       | k the appropriate box                         | to describe your business:  |
|      |  |            |                             | Health Care Busine                            | ess (as defined in 11 U.S.C. § 101(27A))  |
|      |  |            |                             | Single Asset Real                             | Estate (as defined in 11 U.S.C. § 101(51B))   |
|      |  |            |                             | Stockbroker (as de                            | efined in 11 U.S.C. § 101(53A))   |
|      |  |            |                             | Commodity Broker                              | r (as defined in 11 U.S.C. § 101(6))  |
|      |  |            |                             | None of the above                             |   |
| 3.   | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code and are<br>you a <i>small business</i><br>debtor?                                   | deadlines  | s. If you in<br>is, cash-fl | dicate that you are a<br>ow statement, and fe | court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure |
|      | For a definition of small  | ■ No.      | I am r                      | ot filing under Chapt                         | ter 11.   |
|      | business debtor, see 11 U.S.C. § 101(51D).   | □ No.      | I am f<br>Code.             |   | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy  |
|      |  | ☐ Yes.     |                             |   | 11, I am a small business debtor according to the definition in the Bankruptcy Code, and d under Subchapter V of Chapter 11.  |
|      |  | ☐ Yes.     |                             |   | 11, I am a small business debtor according to the definition in the Bankruptcy Code, and<br>Subchapter V of Chapter 11.   |
| art  | : 4: Report if You Own or  | · Have Any | Hazardo                     | ous Property or Any                           | Property That Needs Immediate Attention   |
| 4.   | Do you own or have any   | ■ No.      |                             |   |   |
|      | property that poses or is<br>alleged to pose a threat<br>of imminent and<br>identifiable hazard to   | ☐ Yes.     | What is                     | the hazard?                                   |   |
|      | public health or safety?<br>Or do you own any<br>property that needs<br>immediate attention?   |            |                             | liate attention is why is it needed?          |   |
|      | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?                                |            | Where is                    | s the property?                               |   |
|      | •  |            |                             |   | Number, Street, City, State & Zip Code  |
|      |  |            |                             |   |   |

Debtor 1 Michelle O'Brien

Case number (if known)

Part 5:

**Explain Your Efforts to Receive a Briefing About Credit Counseling** 

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

## About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form Case 5:20-bk-01180-Poly Company Poly Control File of the Strategie of the Case 5:20-bk-01180-Poly Case 5:20-bk-0

| Deb | tor 1 Michelle O'Brien  |                       |                                  | Ca  | ase number (if known)   |  |
|-----|---|-----------------------|----------------------------------|---|-------------------------|--|
| Par | t 6: Answer These Questi  | ons for Re            | eporting Purposes                |   |                         |  |
| 16. | What kind of debts do you have?   | 16a.                  |                                  | nsumer debts? Consumer deb<br>onal, family, or household purpo    |                         | J.S.C. § 101(8) as "incurred by an                               |
|     |   |                       | ☐ No. Go to line 16b.            |   |                         |  |
|     |   |                       | Yes. Go to line 17.              |   |                         |  |
|     |   | 16b.                  |                                  | siness debts? Business debts stment or through the operation      |                         |  |
|     |   |                       | ☐ No. Go to line 16c.            |   |                         |  |
|     |   |                       | ☐ Yes. Go to line 17.            |   |                         |  |
|     |   | 16c.                  | State the type of debts you ov   | ve that are not consumer debts                                    | or business debts       |  |
| 17. | Are you filing under<br>Chapter 7?  | □ No.                 | I am not filing under Chapter 7  | 7. Go to line 18.   |                         |  |
|     | Do you estimate that<br>after any exempt<br>property is excluded and<br>administrative expenses | ■ Yes.                | are paid that funds will be ava  | o you estimate that after any exilable to distribute to unsecured |                         | uded and administrative expenses                                 |
|     | are paid that funds will  |                       | ■ No                             |   |                         |  |
|     | be available for distribution to unsecured creditors?   |                       | ☐ Yes                            |   |                         |  |
| 18. | How many Creditors do   | <b>1</b> -49          |                                  | <b>1</b> ,000-5,000   | ☐ 2 <u>5</u>            | 5,001-50,000   |
|     | you estimate that you owe?  | □ 50-99               |                                  | <b>5001-10,000</b>  | □ 50                    | 0,001-100,000  |
|     |   | ☐ 100-19<br>☐ 200-99  |                                  | □ 10,001-25,000   | □м                      | lore than100,000   |
| 19. | How much do you   | <b>\$</b> \$0 - \$5   | 50 000                           | □ \$1,000,001 - \$10 milli  | on 🗆 \$5                | 500,000,001 - \$1 billion  |
|     | estimate your assets to be worth?   |                       | 01 - \$100,000                   | □ \$10,000,001 - \$50 mi  | illion 🔲 \$^            | 1,000,000,001 - \$10 billion                                     |
|     | be worth.   |                       | 01 - \$500,000                   | □ \$50,000,001 - \$100 m □ \$100,000,001 - \$500                  |                         | 10,000,000,001 - \$50 billion<br>lore than \$50 billion          |
|     |   | □ \$500,0             | 001 - \$1 million                | <b>山</b> \$100,000,001 - \$500                                    | million L IVI           | lore than \$50 billion   |
| 20. | How much do you   | <b>=</b> \$0 - \$5    | 50,000                           | □ \$1,000,001 - \$10 milli  | on 🗆 \$5                | 500,000,001 - \$1 billion  |
|     | estimate your liabilities to be?  | □ \$50,0              | 01 - \$100,000                   | □ \$10,000,001 - \$50 mi  |                         | 51,000,000,001 - \$10 billion                                    |
|     |   |                       | 001 - \$500,000                  | □ \$50,000,001 - \$100 m  |                         | \$10,000,000,001 - \$50 billion                                  |
|     |   | <b>□</b> \$500,0      | 001 - \$1 million                | □ \$100,000,001 - \$500   | million 🗀 N             | More than \$50 billion   |
| Par | Sign Below  |                       |                                  |   |                         |  |
| For | you   | I have exa            | amined this petition, and I decl | are under penalty of perjury tha                                  | at the information prov | rided is true and correct.                                       |
|     |   |                       |                                  | I am aware that I may proceed lief available under each chapte    |                         |  |
|     |   |                       |                                  | ot pay or agree to pay someone notice required by 11 U.S.C. §     |                         | ey to help me fill out this                                      |
|     |   | I request             | relief in accordance with the ch | napter of title 11, United States                                 | Code, specified in this | s petition.  |
|     |   | bankrupto<br>and 3571 | y case can result in fines up to | concealing property, or obtaining \$250,000, or imprisonment for  |                         | by fraud in connection with a bth. 18 U.S.C. §§ 152, 1341, 1519, |
|     |   | Michelle              | O'Brien<br>of Debtor 1           | Signatur  | re of Debtor 2          |  |
|     |   | Executed              | on March 30, 2020                | Execute   | d on                    |  |
|     |   |                       | MM / DD / YYYY                   |   | MM / DD / YYY           | YY   |
|     |   |                       |                                  |   |                         |  |

| Debtor 1 Michelle O'Brien   |   | Cas                        | e number (if known)   |
|---|---|----------------------------|---|
| For your attorney, if you are represented by one                              | under Chapter 7, 11, 12, or 13 of title 11, Unite | ed States Code, and have e | informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b) |
| If you are not represented by an attorney, you do not need to file this page. |   |                            | eledge after an inquiry that the information in the   |
| . •   | /s/ Robert M. Reedy                               | Date                       | March 30, 2020  |
|   | Signature of Attorney for Debtor                  |                            | MM / DD / YYYY  |
|   | Robert M. Reedy 85989                             |                            |   |
|   | Printed name                                      |                            |   |
|   | REEDY LAW OFFICE                                  |                            |   |
|   | Firm name   |                            | <del></del>   |
|   | 7 East Main Street                                |                            |   |
|   | P.O. Box 334                                      |                            |   |
|   | Schuylkill Haven, PA 17972                        |                            |   |
|   | Number, Street, City, State & ZIP Code            |                            |   |
|   | Contact phone <b>570-385-9110</b>                 | Email address              | attyreedy@yahoo.com,<br>magweiser@aol.com   |
|   | 85989 PA  |                            |   |
|   | Bar number & State                                |                            |   |

| Fill          | in this informa                    | tion to identify your  | case:   |   |             |              |                             |
|---------------|------------------------------------|--|---|---|-------------|--------------|-----------------------------|
|               | otor 1                             | Michelle O'Brien   |   |   |             |              |                             |
|               |                                    | First Name   | Middle Name   | Last Name   |             |              |                             |
|               | otor 2<br>use if, filing)          | First Name   | Middle Name   | Last Name   |             |              |                             |
| Unit          | ed States Bank                     | ruptcy Court for the:  | MIDDLE DISTRICT O                                     | F PENNSYLVANIA  |             |              |                             |
| Cas           | e number                           |  |   |   |             |              |                             |
| (if kn        | own)                               |  |   |   |             | _            | if this is an<br>ded filing |
|               |                                    |  |   |   |             |              |                             |
| Of            | ficial Forr                        | m 106Sum   |   |   |             |              |                             |
|               |                                    |  |   | and Certain Statistical Inform  |             |              | 12/15                       |
| infoi<br>your | rmation. Fill ou<br>original forms | t all of your schedule                                       | es first; then complete                               | le are filing together, both are equally resp<br>the information on this form. If you are fili<br>ck the box at the top of this page. |             |              |                             |
|               |                                    |  |   |   |             | Your as      | ssets<br>f what you own     |
| 1.            | Schedule A/E<br>1a. Copy line      | <b>8: Property</b> (Official Fo<br>55, Total real estate, fo | orm 106A/B)<br>om Schedule A/B                        |   |             | \$           | 0.00                        |
|               | 1b. Copy line                      | 62, Total personal pro                                       | perty, from Schedule A/E                              | 3   |             | \$           | 2,982.91                    |
|               | 1c. Copy line 6                    | 63, Total of all property                                    | on Schedule A/B                                       |   |             | \$           | 2,982.91                    |
| Par           | t 2: Summar                        | ize Your Liabilities   |   |   |             |              |                             |
|               | -                                  |  |   |   |             |              | abilities<br>t you owe      |
| 2.            |                                    |  | laims Secured by Proper<br>mn A, Amount of claim, a   | rty (Official Form 106D)<br>at the bottom of the last page of Part 1 of <i>Sch</i> e  | edule D     | \$           | 0.00                        |
| 3.            |                                    |  | Unsecured Claims (Offic<br>1 (priority unsecured clai | ial Form 106E/F)<br>ims) from line 6e of <i>Schedule E/F</i>  |             | \$           | 0.00                        |
|               | 3b. Copy the                       | total claims from Part                                       | 2 (nonpriority unsecured                              | claims) from line 6j of Schedule E/F  |             | \$           | 27,188.10                   |
|               |                                    |  |   | Your total  | liabilities | \$           | 27,188.10                   |
| Par           | 3: Summar                          | ize Your Income and  | Expenses  |   |             |              |                             |
| 4.            |                                    | our Income (Official Fo                                      |   | ıle I   |             | \$           | 3,330.00                    |
| 5.            |                                    | our Expenses (Official nthly expenses from li                |   |   |             | \$           | 3,436.52                    |
| Par           | t 4: Answer                        | These Questions for  | Administrative and Sta                                | atistical Records   |             |              |                             |
| 6.            | , ,                                | • •  | er Chapters 7, 11, or 13 on this part of the form.    | ? Check this box and submit this form to the co   | urt with yo | ur other sch | nedules.                    |
| 7.            | ■ Yes<br>What kind of              | debt do you have?  |   |   |             |              |                             |

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

Case number (if known)

| \$ | 0.0 | 0 |
|----|-----|---|
|    |     |   |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total claim |      |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following:   |             |      |
| 9a. Domestic support obligations (Copy line 6a.)   | \$          | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$          | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$          | 0.00 |
| 9d. Student loans. (Copy line 6f.)   | \$          | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$          | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$         | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$          | 0.00 |

|                       | or 1   | Michelle O'Brien  |   |  |  |
|-----------------------|--|---|---|--|--|
|                       |  | First Name  | Middle Name Last Name   |  |  |
| Debto<br>Spous        | or 2<br>e, if filing)  | First Name  | Middle Name Last Name   |  |  |
|                       |  |   | LE DISTRICT OF PENNSYLVANIA   |  |  |
|                       |  | initiation and initiation and initiation  | LE BIOTHET OF FERNOLEY MAIN   |  |  |
| Case                  | number   |   |   |  | ☐ Check if this is ar amended filing   |
|                       |  |   |   |  |  |
| Offi                  | cial Fo  | rm 106A/B   |   |  |  |
| Sc                    | nedule   | e A/B: Propert  | V   |  | 12/15  |
| hink i<br>nform       | fits best. Be  | e as complete and accurate as p<br>e space is needed, attach a sepa   | List an asset only once. If an asset fits in more than o<br>ossible. If two married people are filing together, both a<br>rate sheet to this form. On the top of any additional pag   | re equally responsible for su  | pplying correct  |
| Part 1                | Describe I   | Each Residence, Building, Land,   | or Other Real Estate You Own or Have an Interest In   |  |  |
| . Do                  | ou own or h  | ave any legal or equitable intere   | st in any residence, building, land, or similar property?   |  |  |
|                       | lo. Go to Part   | : 2   |   |  |  |
| _                     |  | s the property?   |   |  |  |
|                       |  | p   |   |  |  |
| Part 2                | Describe \   | Your Vehicles   |   |  |  |
|                       |  |   |   |  |  |
|                       |  |   | interest in any vehicles, whether they are register report it on Schedule G: Executory Contracts and U  |  | ehicles you own that   |
| ome                   | one else driv<br>rs, vans, tru<br>No   |   | report it on Schedule G: Executory Contracts and U  |  | ehicles you own that   |
| omed<br>c. Ca         | one else driv<br>rs, vans, tru<br>No<br>res  | res. If you lease a vehicle, also   | report it on <i>Schedule G: Executory Contracts and U</i>   |  | ·  |
| omed<br>Ca            | one else drivers, vans, trues No Yes Make:   | res. If you lease a vehicle, also   | report it on Schedule G: Executory Contracts and Usehicles, motorcycles  Who has an interest in the property? Check one   | Do not deduct secured cl   | aims or exemptions. Put  |
| omed<br>c. Ca         | one else driv<br>rs, vans, tru<br>No<br>Yes<br>Make: <u>E</u><br>Model: <u>L</u>   | res. If you lease a vehicle, also ucks, tractors, sport utility ve  | report it on <i>Schedule G: Executory Contracts and U</i>   | Do not deduct secured cl<br>the amount of any secure<br>Creditors Who Have Clair   | aims or exemptions. Put ed claims on Schedule D: ms Secured by Property.   |
| omed<br>c. Ca         | nne else driv  | Buick Lesabre 2001  e mileage: 111,000  | who has an interest in the property? Check one  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only  | Do not deduct secured cl   | aims or exemptions. Put  |
| omed<br>3. Ca<br>□ I  | one else drivers, vans, truendo de la  | Buick Lesabre 2001  e mileage: 111,000  | who has an interest in the property? Check one  Debtor 1 only Debtor 2 only   | Do not deduct secured cl<br>the amount of any secure<br>Creditors Who Have Clair   | aims or exemptions. Put d claims on Schedule D: ms Secured by Property.  Current value of the  |
| Gomed<br>3. Ca<br>□ I | nne else driv  | Buick Lesabre 2001  e mileage: 111,000  | who has an interest in the property? Check one  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only  | Do not deduct secured cl<br>the amount of any secure<br>Creditors Who Have Clair   | aims or exemptions. Put d claims on Schedule D: ms Secured by Property.  Current value of the  |
| 3.1                   | Make: E Model: 1 Year: 2 Approximate Other inform  | Buick Lesabre 2001 e mileage: 111,000 nation:   | who has an interest in the property? Check one  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  | Do not deduct secured cl<br>the amount of any secure<br>Creditors Who Have Clair<br>Current value of the<br>entire property?   | aims or exemptions. Put ad claims on <i>Schedule D:</i> and <i>Schedule D:</i> and <i>Scured by Property.</i> Current value of the portion you own?  |
| omed<br>. Ca<br>□ I   | me else drivers, vans, truendo de la composition della composition | Buick Lesabre 2001 e mileage: 111,000 nation:   | who has an interest in the property? Check one  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one  | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$1,243.00  Do not deduct secured of the amount of any secure   | aims or exemptions. Put ed claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$1,243.00  aims or exemptions. Put ed claims on Schedule D:  |
| 3.1                   | make: Approximate Other inform  Make: Make: Make: Make: Make: Make: Model: I   | Buick Lesabre 2001 e mileage: 111,000 nation:   | who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  Who has an interest in the property? Check one Debtor 1 only  | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$1,243.00  Do not deduct secured of the amount of any secure Creditors Who Have Clair  | aims or exemptions. Put ad claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$1,243.00  aims or exemptions. Put ad claims on Schedule D: ms Secured by Property.  |
| 3.1                   | make: Approximate Other inform  Make: Make: Make: Make: Make: Make: Model: I   | Buick Lesabre 2001 e mileage: 111,000 nation:   | who has an interest in the property? Check one  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one  | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$1,243.00  Do not deduct secured of the amount of any secure   | aims or exemptions. Put ed claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$1,243.00  aims or exemptions. Put ed claims on Schedule D:  |
| 3. <b>Ca</b>          | Make:  Make:  Make:  Model:  Make:  Model:  Make:  Model:  Make:  Model:  Model:  Year:  Model:  Model | Buick Lesabre 2001 e mileage: 111,000 Subaru mpreza 2003 e mileage: 210,000   | who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only  | Do not deduct secured cl the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$1,243.00  Do not deduct secured cl the amount of any secure Creditors Who Have Clair Current value of the                            | aims or exemptions. Put ad claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  \$1,243.00  aims or exemptions. Put ad claims on Schedule D: ims Secured by Property.  Current value of the                |
| 3.1                   | Make:  Make:  Make:  Model:  Year:  Other inform  Make:  Model:  Year:  Approximate  Approximate  Approximate  Approximate  Approximate  Approximate  Approximate  Approximate   | Buick Lesabre 2001 e mileage: 111,000 Subaru mpreza 2003 e mileage: 210,000   | who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Check if this is community property (see instructions)   | Do not deduct secured cl the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$1,243.00  Do not deduct secured cl the amount of any secure Creditors Who Have Clair Current value of the                            | aims or exemptions. Put ad claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$1,243.00  aims or exemptions. Put ad claims on Schedule D: ms Secured by Property.  Current value of the portion you own? |
| 3.1                   | Make:  Make:  Make:  Model:  Year:  Other inform  Make:  Model:  Year:  Approximate  Approximate  Approximate  Approximate  Approximate  Approximate  Approximate  Approximate   | Buick Lesabre 2001 e mileage: 111,000 Subaru mpreza 2003 e mileage: 210,000   | who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one Debtor 1 only Check if this is community property (see instructions)  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this is community property                    | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$1,243.00  Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?           | aims or exemptions. Put ad claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  \$1,243.00  aims or exemptions. Put ad claims on Schedule D: ims Secured by Property.  Current value of the                |
| 3.1 3.2               | Make: S Model: I Year: 2 Approximate Other inform  Make: S Model: I Year: 2 Approximate Other inform   | Buick Lesabre 2001 e mileage: 111,000 mation:  Subaru mpreza 2003 e mileage: 210,000 mation:                                  | who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one Debtor 1 only Check if this is community property (see instructions)  Check if this is community property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions) | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$1,243.00  Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$307.00 | aims or exemptions. Put ad claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$1,243.00  aims or exemptions. Put ad claims on Schedule D: ms Secured by Property.  Current value of the portion you own? |
| 3.1 Wa                | Make: S Model: I Year: 2 Approximate Other inform  Make: S Model: I Year: 2 Approximate Other inform  Make: S Model: I Year: 2 Approximate Other inform  | Buick Lesabre 2001 Emileage: 111,000 Ination: 111,000 Subaru Impreza 2003 Emileage: 210,000 Ination: 111,000 Ination: 111,000 | who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one Debtor 1 only Check if this is community property (see instructions)  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this is community property                    | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$1,243.00  Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$307.00 | aims or exemptions. Put ad claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$1,243.00  aims or exemptions. Put ad claims on Schedule D: ms Secured by Property.  Current value of the portion you own? |

Official Form 106A/B Schedule A/B: Property page 1

Case 5:20-bk-01180-RNO

Desc

| De  | ebtor 1        | Michelle O'Brien Case number (if known)   |   |
|-----|----------------|---|---|
| 5   |                | e dollar value of the portion you own for all of your entries from Part 2, including any entries for you have attached for Part 2. Write that number here=>                               | \$1,550.00  |
|     | 40 0           | T. V. B   |   |
|     |                | scribe Your Personal and Household Items  In or have any legal or equitable interest in any of the following items?   | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 6.  | Exampl<br>☐ No | old goods and furnishings es: Major appliances, furniture, linens, china, kitchenware  Describe   | ·   |
|     |                | Household Goods and Furnishings   | \$395.00  |
| 7.  | □ No           | es: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music co<br>including cell phones, cameras, media players, games  Describe        | ollections; electronic devices  |
|     |                | Ususal Household Electronics  | \$475.00  |
| 8.  | Exampl         | bles of value es: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, other collections, memorabilia, collectibles  Describe | or baseball card collections;   |
| 9.  | Example No ■   | ent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes a musical instruments  Describe                 | and kayaks; carpentry tools;  |
| 10. | ■ No           | ns oles: Pistols, rifles, shotguns, ammunition, and related equipment Describe  |   |
| 11. | □ No           | s  bles: Everyday clothes, furs, leather coats, designer wear, shoes, accessories  Describe   |   |
|     |                | Regular Attire  | \$200.00  |
| 12. | ■ No           | y oles: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, go Describe  | old, silver   |
| 13. | Examp<br>■ No  | rm animals bles: Dogs, cats, birds, horses  Describe  |   |
| 14. | ■ No           | her personal and household items you did not already list, including any health aids you did not list  Give specific information  |   |

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Official Form 106A/B

Best Case Bankruptcy

page 2

Schedule A/B: Property

| De  | btor 1 Michelle            | e O'Brien   | Case number (if known  | )   |
|-----|----------------------------|---|--|---|
| 15. |                            | •   | Part 3, including any entries for pages you have attached  | \$1,070.00  |
| Par | rt 4: Describe Your        | r Financial Assots  |  |   |
|     |                            | any legal or equitable interest   | in any of the following?   | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|     | □ No                       | y you have in your wallet, in your  | home, in a safe deposit box, and on hand when you file your peti   | tion  |
|     |                            |   | Cash on<br>Debtor  | \$36.00   |
|     | ,                          | king, savings, or other financial ac  | ccounts; certificates of deposit; shares in credit unions, brokerage nts with the same institution, list each.                                   | houses, and other similar   |
|     | Yes                        |   | Institution name:  |   |
|     |                            | 17.1. Checking  | M&T Bank   | \$326.91  |
|     |                            | unds, or publicly traded stocks funds, investment accounts with but the last transfer in the | brokerage firms, money market accounts   |   |
|     | joint venture              | led stock and interests in incor  | rporated and unincorporated businesses, including an intere  | st in an LLC, partnership, and  |
|     | ■ No<br>□ Yes. Give spec   | cific information about them<br>Name of entity:   |  |   |
|     | Negotiable instrui         | <i>ment</i> s include personal checks, c  | gotiable and non-negotiable instruments cashiers' checks, promissory notes, and money orders. transfer to someone by signing or delivering them. |   |
| ļ   | ☐ Yes. Give specif         | fic information about them<br>Issuer name:  |  |   |
|     | _ ′                        |   | o, 403(b), thrift savings accounts, or other pension or profit-sharing   | g plans   |
|     | ■ No<br>□ Yes. List each a | account separately. Type of account:  | Institution name:  |   |
|     | Your share of all          |   | so that you may continue service or use from a company nt, public utilities (electric, gas, water), telecommunications compa                     | nies, or others   |
|     | ☐ Yes                      |   | Institution name or individual:  |   |
|     | Annuities (A cont ■ No     | ract for a periodic payment of mo   | oney to you, either for life or for a number of years)   |   |
| l   | ☐ Yes                      | Issuer name and description.  |  |   |
|     |                            | lucation IRA, in an account in a b)(1), 529A(b), and 529(b)(1).   | qualified ABLE program, or under a qualified state tuition pr  | ogram.  |

Official Form 106A/B Schedule A/B: Property

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page 3

| De  | ebtor 1        | Michelle O'Brien   | Case number (if know  | 'n)   |
|-----|----------------|--|---|---|
|     | ■ No           |  |   |   |
|     | ☐ Yes          | Institution name and descript  | tion. Separately file the records of any interests.11 U.S.C. § 521(                       | (c):  |
| 25. | Trusts         | equitable or future interests in property  | (other than anything listed in line 1), and rights or powers e                            | exercisable for your benefit  |
|     | ☐ Yes.         | Give specific information about them   |   |   |
| 26. |                | s, copyrights, trademarks, trade secrets,<br>oles: Internet domain names, websites, proc                           | and other intellectual property<br>eeds from royalties and licensing agreements           |   |
|     |                | Give specific information about them   |   |   |
| 27. |                | es, franchises, and other general intangil<br>bles: Building permits, exclusive licenses, co                       | bles soperative association holdings, liquor licenses, professional lice                  | nses  |
|     |                | Give specific information about them   |   |   |
| M   | oney or        | property owed to you?  |   | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. |                | unds owed to you   |   |   |
|     | ■ No<br>□ Yes. | Give specific information about them, include  | ding whether you already filed the returns and the tax years                              |   |
| 29. |                | support oles: Past due or lump sum alimony, spousa   | al support, child support, maintenance, divorce settlement, prope                         | rty settlement  |
|     | ☐ Yes.         | Give specific information  |   |   |
| 30. | Examp          | amounts someone owes you<br>bles: Unpaid wages, disability insurance pay<br>benefits; unpaid loans you made to sor | vments, disability benefits, sick pay, vacation pay, workers' compresone else             | pensation, Social Security  |
|     | ■ No<br>□ Yes. | Give specific information  |   |   |
| 31. | Examp          | ts in insurance policies<br>oles: Health, disability, or life insurance; hea                                       | Ith savings account (HSA); credit, homeowner's, or renter's insu                          | rance   |
|     | ■ No<br>□ Yes. | Name the insurance company of each polic   | •   |   |
|     |                | Company name:  | Beneficiary:  | Surrender or refund<br>value:   |
| 32. | If you a       | terest in property that is due you from so<br>are the beneficiary of a living trust, expect po<br>one has died.    | omeone who has died roceeds from a life insurance policy, or are currently entitled to re | eceive property because   |
|     | _              | Give specific information  |   |   |
| 33. | _Examp         | against third parties, whether or not you oles: Accidents, employment disputes, insura                             | u have filed a lawsuit or made a demand for payment ance claims, or rights to sue         |   |
|     | ■ No<br>□ Yes. | Describe each claim  |   |   |
| 34. | Other o        | contingent and unliquidated claims of eve  | ery nature, including counterclaims of the debtor and rights                              | to set off claims   |
|     | ☐ Yes.         | Describe each claim  |   |   |
|     | ■ No           | ancial assets you did not already list   |   |   |
|     |                | Give specific information<br>n 106A/B  | Schedule A/B: Property  | page -  |

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|  | Michelle O'Brien  |  | Case number (if known) |  |
|--|---|--|------------------------|--|
|  | ld the dollar value of all of your entries from Part 4, includir<br>Part 4. Write that number here  |  |                        | \$362.91   |
| Part 5:  | Describe Any Business-Related Property You Own or Have an Inte  | rest In. List any real est                               | ate in Part 1.         |  |
| 37. <b>Do y</b> e  | ou own or have any legal or equitable interest in any business-relat  | ed property?   |                        |  |
| ■ No.  | Go to Part 6.   |  |                        |  |
| ☐ Yes  | s. Go to line 38.   |  |                        |  |
| Part 6:  | Describe Any Farm- and Commercial Fishing-Related Property You lif you own or have an interest in farmland, list it in Part 1.  | Own or Have an Intere                                    | st In.                 |  |
| 46. <b>Do</b> y  | ou own or have any legal or equitable interest in any farm-   | or commercial fishing                                    | ng-related property?   |  |
|  | No. Go to Part 7.   |  |                        |  |
|  | Yes. Go to line 47.   |  |                        |  |
| Part 7:  | Describe All Property You Own or Have an Interest in That Yo  | u Did Not List Above                                     |                        |  |
|  |   |  |                        |  |
| Exa<br>■ No  | you have other property of any kind you did not already list amples: Season tickets, country club membership oes. Give specific information   | ?  |                        |  |
| Exa<br>■ No<br>□ Ye  | amples: Season tickets, country club membership   |  |                        | \$0.00   |
| Exa<br>■ No<br>□ Ye<br>54. Ad  | amples: Season tickets, country club membership o es. Give specific information   |  |                        | \$0.00   |
| Exa No   | amples: Season tickets, country club membership o es. Give specific information  Id the dollar value of all of your entries from Part 7. Write the List the Totals of Each Part of this Form  rt 1: Total real estate, line 2   | at number here   |                        |  |
| Exa No.  | amples: Season tickets, country club membership o es. Give specific information  Id the dollar value of all of your entries from Part 7. Write the List the Totals of Each Part of this Form  Int 1: Total real estate, line 2 Int 2: Total vehicles, line 5  | at number here<br>\$1,550.00                             |                        |  |
| Exa No.  | amples: Season tickets, country club membership  bes. Give specific information  Id the dollar value of all of your entries from Part 7. Write the List the Totals of Each Part of this Form  Int 1: Total real estate, line 2  Int 2: Total vehicles, line 5  Int 3: Total personal and household items, line 15 | at number here<br>\$1,550.00<br>\$1,070.00               |                        |  |
| Exa No. 1 No | amples: Season tickets, country club membership  as. Give specific information  Id the dollar value of all of your entries from Part 7. Write the List the Totals of Each Part of this Form  Int 1: Total real estate, line 2   | \$1,550.00<br>\$1,070.00<br>\$362.91                     |                        |  |
| 54. Add  Part 8:  55. Pa  57. Pa  58. Pa  59. Pa   | amples: Season tickets, country club membership  as. Give specific information  Id the dollar value of all of your entries from Part 7. Write the List the Totals of Each Part of this Form  In 1: Total real estate, line 2  | \$1,550.00<br>\$1,070.00<br>\$362.91<br>\$0.00           |                        |  |
| Example 1  | amples: Season tickets, country club membership of es. Give specific information  Id the dollar value of all of your entries from Part 7. Write the List the Totals of Each Part of this Form  In 1: Total real estate, line 2  | \$1,550.00<br>\$1,070.00<br>\$362.91<br>\$0.00<br>\$0.00 |                        |  |
| Example 1  | amples: Season tickets, country club membership  as. Give specific information  Id the dollar value of all of your entries from Part 7. Write the List the Totals of Each Part of this Form  Int 1: Total real estate, line 2   | \$1,550.00<br>\$1,070.00<br>\$362.91<br>\$0.00<br>\$0.00 |                        | \$0.00   |
| Example 1  | amples: Season tickets, country club membership of es. Give specific information  Id the dollar value of all of your entries from Part 7. Write the List the Totals of Each Part of this Form  In 1: Total real estate, line 2  | \$1,550.00<br>\$1,070.00<br>\$362.91<br>\$0.00<br>\$0.00 |                        | \$0.00<br>\$0.00<br>\$2,982.9 <sup>2</sup><br>\$2,982.91 |

Official Form 106A/B Schedule A/B: Property page 5

| Fill in this information to identify your case: |                  |                    |              |                                      |  |  |  |
|---|------------------|--------------------|--------------|--------------------------------------|--|--|--|
| Debtor 1  | Michelle O'Brien |                    |              |                                      |  |  |  |
|   | First Name       | Middle Name        | Last Name    |                                      |  |  |  |
| Debtor 2  |                  |                    |              |                                      |  |  |  |
| (Spouse if, filing)                             | First Name       | Middle Name        | Last Name    |                                      |  |  |  |
| United States Bankruptcy Court for the:         |                  | MIDDLE DISTRICT OF | PENNSYLVANIA |                                      |  |  |  |
| Case number<br>(if known)                       |                  |                    |              | ☐ Check if this is an amended filing |  |  |  |

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

|    | ☐ You are claiming state and federal nonbar  | nkruptcy exemptions. 1               | 11 U.S | S.C. § 522(b)(3)  |                                    |
|----|--|--------------------------------------|--------|---|------------------------------------|
|    | ■ You are claiming federal exemptions. 11  | U.S.C. § 522(b)(2)                   |        |   |                                    |
| 2. | For any property you list on Schedule A/E  | that you claim as exe                | mpt,   | fill in the information below.                                  |                                    |
|    | Brief description of the property and line on<br>Schedule A/B that lists this property | Current value of the portion you own | Amo    | ount of the exemption you claim                                 | Specific laws that allow exemption |
|    |  | Copy the value from<br>Schedule A/B  | Che    | eck only one box for each exemption.                            |                                    |
|    | 2001 Buick Lesabre 111,000 miles Line from Schedule A/B: 3.1                           | \$1,243.00                           |        | \$1,243.00  | 11 U.S.C. § 522(d)(2)              |
|    | Ellie Holli Gelledale PAB. G.1   |                                      |        | 100% of fair market value, up to any applicable statutory limit |                                    |
|    | 2003 Subaru Impreza 210,000 miles  | \$307.00                             |        | \$307.00  | 11 U.S.C. § 522(d)(5)              |
|    | Ellie Holli Golledale PAB. G.E   |                                      |        | 100% of fair market value, up to any applicable statutory limit |                                    |
|    | Household Goods and Furnishings Line from Schedule A/B: 6.1                            | \$395.00                             |        | \$395.00  | 11 U.S.C. § 522(d)(3)              |
|    | Line nom <i>Schedule PAB</i> . <b>6.1</b>  |                                      |        | 100% of fair market value, up to any applicable statutory limit |                                    |
|    | Ususal Household Electronics Line from Schedule A/B: 7.1                               | \$475.00                             |        | \$475.00  | 11 U.S.C. § 522(d)(3)              |
|    | Line IIIIII Scriedule AVB. 1.1   |                                      |        | 100% of fair market value, up to any applicable statutory limit |                                    |
|    | Regular Attire Line from Schedule A/B: 11.1  | \$200.00                             |        | \$200.00  | 11 U.S.C. § 522(d)(3)              |
|    | Line Ironi Scriedule A/D. 11.1   |                                      |        | 100% of fair market value, up to any applicable statutory limit |                                    |

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

| Debto | Michelle O'Brien  |                                      |                                       | Case number (if known)  |                                    |  |
|-------|---|--------------------------------------|---------------------------------------|---|------------------------------------|--|
|       | rief description of the property and line on<br>chedule A/B that lists this property  | Current value of the portion you own | · · · · · · · · · · · · · · · · · · · |   | Specific laws that allow exemption |  |
|       |   | Copy the value from<br>Schedule A/B  | Che                                   | ck only one box for each exemption.                             |                                    |  |
| _     | ash on Debtor<br>ne from Schedule A/B: 16.1   | \$36.00                              |                                       | \$36.00   | 11 U.S.C. § 522(d)(5)              |  |
| L     | The Hoth Genedate AVB. 1911   |                                      |                                       | 100% of fair market value, up to any applicable statutory limit |                                    |  |
|       | hecking: M&T Bank   | \$326.91                             |                                       | \$326.91  | 11 U.S.C. § 522(d)(5)              |  |
| Li    | The Hoth Schedule AV.B. 11.1  |                                      |                                       | 100% of fair market value, up to any applicable statutory limit |                                    |  |
| (8    | 3. Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)  ■ No  □ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  □ No □ Yes |                                      |                                       |   |                                    |  |

| Fill in this information to identify your case: |                  |                    |              |  |                                      |  |
|---|------------------|--------------------|--------------|--|--------------------------------------|--|
| Debtor 1  | Michelle O'Brien |                    |              |  |                                      |  |
|   | First Name       | Middle Name        | Last Name    |  | I                                    |  |
| Debtor 2  |                  |                    |              |  |                                      |  |
| (Spouse if, filing)                             | First Name       | Middle Name        | Last Name    |  |                                      |  |
| United States Bankruptcy Court for the:         |                  | MIDDLE DISTRICT OF | PENNSYLVANIA |  |                                      |  |
| Case number<br>(if known)                       |                  |                    |              |  | ☐ Check if this is an amended filing |  |

## Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

Desc

| Fill in t                                       | nis information to identify y  | our case:   |   |                           |   |                                 |  |
|---|--|---|---|---------------------------|---|---------------------------------|--|
| Debtor  | 1 Michelle O'Bri   | en  |   |                           |   |                                 |  |
|   | First Name   | Middle Na   | ame Las   | st Name                   |   |                                 |  |
| Debtor 2<br>(Spouse if                          |  | Middle Na   | ame Las   | st Name                   |   |                                 |  |
| United S  | States Bankruptcy Court for th   | e: MIDDLE DIS   | STRICT OF PENNSYL\  | /ANIA                     |   |                                 |  |
| Case nu<br>(if known)                           | umber  |   | _   |                           |   |                                 | heck if this is an mended filing             |
| Officia   | al Form 106E/F   |   |   |                           |   |                                 |  |
|   | dule E/F: Creditors  | Who Have  | Unsecured Cla   | aims                      |   |                                 | 12/15  |
| Schedule<br>Schedule<br>left. Attac<br>name and | utory contracts or unexpired leads is Executory Contracts and Uise D: Creditors Who Have Claims the Continuation Page to this discase number (if known). | nexpired Leases (Of<br>Secured by Proper<br>s page. If you have r | fficial Form 106G). Do no<br>ty. If more space is need<br>no information to report in | t include a<br>ed, copy t | any creditors with partially<br>he Part you need, fill it out | secured claims<br>number the en | that are listed in tries in the boxes on the |
| Part 1:   | List All of Your PRIORIT   |   |   |                           |   |                                 |  |
| _   | any creditors have priority unse   | cured claims agains   | st you?   |                           |   |                                 |  |
| _ `   | No. Go to Part 2.  |   |   |                           |   |                                 |  |
|   | es.  |   |   |                           |   |                                 |  |
| Part 2:   | List All of Your NONPRIC   | ORITY Unsecured   | Claims  |                           |   |                                 |  |
| 3. Do a   | any creditors have nonpriority u   | nsecured claims ag  | jainst you?   |                           |   |                                 |  |
|   | No. You have nothing to report in t  | his part. Submit this t   | form to the court with your   | other sche                | dules.  |                                 |  |
| <b>■</b> Y                                      |  |   | ,, <b>,</b>   |                           |   |                                 |  |
| unse  | all of your nonpriority unsecure<br>coured claim, list the creditor sepa<br>one creditor holds a particular cla<br>2.                                    | rately for each claim.  | For each claim listed, iden   | ntify what ty             | pe of claim it is. Do not list of                             | laims already inc               | luded in Part 1. If more                     |
|   |  |   |   |                           |   |                                 | Total claim                                  |
| 4.1   | Chase Card Services  |   | Last 4 digits of account  | number                    | 1112  |                                 | \$5,543.69                                   |
|   | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 15298  |   | When was the debt incu  | rred?                     | Opened 12/16  |                                 |  |
|   | Wilmington, DE 19850 Number Street City State Zip Coc Who incurred the debt? Check   |   | As of the date you file, the  | he claim is               | s: Check all that apply                                       |                                 |  |
|   | Debtor 1 only  |   | ☐ Contingent  |                           |   |                                 |  |
|   | Debtor 2 only  |   | ☐ Unliquidated  |                           |   |                                 |  |
|   | Debtor 1 and Debtor 2 only   |   | ☐ Disputed  |                           |   |                                 |  |
|   | ☐ At least one of the debtors an   | d another   | Type of NONPRIORITY u   | unsecured                 | claim:  |                                 |  |
|   | ☐ Check if this claim is for a   | community   | ☐ Student loans   |                           |   |                                 |  |
|   | debt<br>Is the claim subject to offset?  | ·   | Obligations arising out report as priority claims                                     | t of a separ              | ration agreement or divorce                                   | hat you did not                 |  |
|   | ■ No   |   | ☐ Debts to pension or pr  | ofit-sharing              | g plans, and other similar del                                | ots                             |  |
|   | Yes  |   | Other. Specify Cred   | dit card                  | purchases   |                                 |  |

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 5

| btor 1 Michelle O'Brien  |  | Case number (if known)                        |            |  |  |  |
|--|--|---|------------|--|--|--|
| Discover Financial   | Last 4 digits of account number                              | 6344  | \$7,229.57 |  |  |  |
| Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3025                             | When was the debt incurred?                                  | Opened 05/17                                  |            |  |  |  |
| New Albany, OH 43054  Number Street City State Zip Code                              | As of the date you file, the claim                           | is: Check all that apply                      |            |  |  |  |
| Who incurred the debt? Check one.  |  |   |            |  |  |  |
| Debtor 1 only  | ☐ Contingent   |   |            |  |  |  |
| Debtor 2 only  | ☐ Unliquidated   |   |            |  |  |  |
| ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |   |            |  |  |  |
| $\square$ At least one of the debtors and another                                    | Type of NONPRIORITY unsecure                                 | d claim:                                      |            |  |  |  |
| ☐ Check if this claim is for a community   | ☐ Student loans  |   |            |  |  |  |
| debt Is the claim subject to offset?   | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not |            |  |  |  |
| ■ No   | Debts to pension or profit-sharing                           | ng plans, and other similar debts             |            |  |  |  |
| Yes  | Other. Specify Credit card                                   | purchases                                     |            |  |  |  |
| Erie Insurance Group   | Last 4 digits of account number                              | 0972  | \$76.08    |  |  |  |
| Nonpriority Creditor's Name 100 Erie Place Erie, PA 16530                            | When was the debt incurred?                                  | October 2018                                  |            |  |  |  |
| Number Street City State Zip Code  | As of the date you file, the claim                           | is: Check all that apply                      |            |  |  |  |
| Who incurred the debt? Check one.  |  |   |            |  |  |  |
| Debtor 1 only  | ☐ Contingent   |   |            |  |  |  |
| Debtor 2 only  | ☐ Unliquidated   |   |            |  |  |  |
| Debtor 1 and Debtor 2 only   | □ Disputed   |   |            |  |  |  |
| ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecure                                 | d claim:                                      |            |  |  |  |
| ☐ Check if this claim is for a community   | ☐ Student loans  |   |            |  |  |  |
| debt Is the claim subject to offset?   | Obligations arising out of a separeport as priority claims   | aration agreement or divorce that you did not |            |  |  |  |
| ■ No   | Debts to pension or profit-sharing                           | ng plans, and other similar debts             |            |  |  |  |
| Yes  | Other. Specify Collection                                    | Account                                       |            |  |  |  |
| Erie Insurance Group   | Last 4 digits of account number                              | 4524  | \$10.67    |  |  |  |
| Nonpriority Creditor's Name 100 Erie Place   | When was the debt incurred?                                  | October 2018                                  |            |  |  |  |
| Erie, PA 16530  Number Street City State Zip Code  Who incurred the debt? Check one. | As of the date you file, the claim                           | is: Check all that apply                      |            |  |  |  |
| ■ Debtor 1 only  | ☐ Contingent   |   |            |  |  |  |
| Debtor 2 only  | ☐ Unliquidated   |   |            |  |  |  |
| Debtor 1 and Debtor 2 only   | ☐ Disputed   |   |            |  |  |  |
| ☐ At least one of the debtors and another  | d claim:   |   |            |  |  |  |
| ☐ Check if this claim is for a community   |  |   |            |  |  |  |
| debt Is the claim subject to offset?   | ☐ Obligations arising out of a separeport as priority claims |   |            |  |  |  |
| ■ No   | Debts to pension or profit-sharing                           | ng plans, and other similar debts             |            |  |  |  |
| ☐ Yes  | ■ Other. Specify Collection                                  | Account                                       |            |  |  |  |
|  | Caron Opcomy   |   |            |  |  |  |

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

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Case 5:20-bk-01180-RNO

| Debtor 1 Michelle O'Brien |  |   |  |            |
|---------------------------|--|---|--|------------|
| 4.5                       | Huntington Natl Bk Nonpriority Creditor's Name   | Last 4 digits of account number                               | 1155   | \$6,250.79 |
|                           | Attn: Bankruptcy<br>P.O. Box 340996  | When was the debt incurred?                                   | Opened 11/15                                 |            |
|                           | Columbus, OH 43234  Number Street City State Zip Code  Who incurred the debt? Check one.   | As of the date you file, the claim i                          | s: Check all that apply                      |            |
|                           | ■ Debtor 1 only  | ☐ Contingent  |  |            |
|                           | ☐ Debtor 2 only  | ☐ Unliquidated  |  |            |
|                           | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |  |            |
|                           | $\square$ At least one of the debtors and another  | Type of NONPRIORITY unsecured                                 | d claim:                                     |            |
|                           | Check if this claim is for a community debt  |   | ration agreement or divorce that you did not |            |
|                           | Is the claim subject to offset?  | report as priority claims  Debts to pension or profit-sharin  | a plane, and other similar debta             |            |
|                           | ■ No   |   |  |            |
|                           | Yes  | Other. Specify Repossed                                       | venicie                                      |            |
| 4.6                       | MDJ Plachko Nonpriority Creditor's Name  | Last 4 digits of account number                               | 2019   | \$7,440.10 |
|                           | Borough Building<br>2nd Floor  | When was the debt incurred?                                   | January 9, 2020                              |            |
|                           | Port Carbon, PA 17965  Number Street City State Zip Code                                   | As of the date you file, the claim i                          | se. Chack all that apply                     |            |
|                           | Who incurred the debt? Check one.  | As of the date you me, the claim                              | S. Offect all that apply                     |            |
|                           | ■ Debtor 1 only  | ☐ Contingent  |  |            |
|                           | Debtor 2 only  | ☐ Unliquidated  |  |            |
|                           | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |  |            |
|                           | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured                                 | d claim:                                     |            |
|                           | ☐ Check if this claim is for a community   | ☐ Student loans   |  |            |
|                           | debt Is the claim subject to offset?   | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not |            |
|                           | No   | Debts to pension or profit-sharin                             | g plans, and other similar debts             |            |
|                           | ☐ Yes  | Other. Specify Judgment                                       | g plans, and other similar debts             |            |
|                           |  | Cutor. Speeding   |  |            |
| 4.7                       | Waypoint Resource Group Nonpriority Creditor's Name  | Last 4 digits of account number                               | 1537   | \$637.20   |
|                           | Attn: Bankruptcy<br>301 Sundance Pwy   | When was the debt incurred?                                   | Opened 10/19                                 |            |
|                           | Round Rock, TX 78681  Number Street City State Zip Code  Who incurred the debt? Check one. | As of the date you file, the claim i                          | s: Check all that apply                      |            |
|                           | ■ Debtor 1 only  | ☐ Contingent  |  |            |
|                           | Debtor 2 only  | ☐ Unliquidated  |  |            |
|                           | Debtor 1 and Debtor 2 only   |   |  |            |
|                           | ☐ At least one of the debtors and another  | ☐ Disputed  Type of NONPRIORITY unsecured                     | d claim:                                     |            |
|                           | ☐ Check if this claim is for a community   | ☐ Student loans   |  |            |
|                           | debt Is the claim subject to offset?   | report as priority claims                                     | ration agreement or divorce that you did not |            |
|                           | No   | ☐ Debts to pension or profit-sharin                           |  |            |
|                           | Yes  | Other. Specify Collection                                     | Account                                      |            |

Part 3: List Others to Be Notified About a Debt That You Already Listed

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

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<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

| Debtor 1 Michelle O'Brien  | Case number (if known)   |
|--|--|
| Name and Address ARS National Services POB 469046 Escondido, CA 92046          | On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.1 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number  1112 |
| Name and Address Chase Card Services Po Box 15369 Wilmington, DE 19850         | On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.1 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number       |
| Name and Address Credit Collections Svc 725 Canton Street Norwood, MA 02062    | On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.7 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number  1822 |
| Name and Address Discover POB 742655 Cincinnati, OH 45274                      | On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.2 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number       |
| Name and Address Discover Financial Pob 15316 Wilmington, DE 19850             | On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.2 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number       |
| Name and Address Huntingdon 5555 Cleveland Avenue GW2W19 Columbus, OH 43231    | On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.5 of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number 1155   |
| Name and Address<br>Huntington Natl Bk<br>Po Box 1558<br>Columbus, OH 43216    | On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.5 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number       |
| Name and Address<br>MRS BPO, LLC<br>1930 Olney Avenue<br>Cherry Hill, NJ 08003 | On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.1 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number  9961 |
| Name and Address Nationwide Credit, Inc POB 14581 Des Moines, IA 50306         | On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.1 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number  6210 |
| Name and Address<br>RMS<br>POB 361348<br>Columbus, OH 43236                    | On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.3 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number  0972 |
| Name and Address RUI Credit Services POB 1349 Melville, NY 11747               | On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.7 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number  2478 |
| Name and Address Waypoint Resource Group                                       | On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.7 of (Check one):   Part 1: Creditors with Priority Unsecured Claims  |

Schedule E/F: Creditors Who Have Unsecured Claims

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Official Form 106 E/F

| Debtor 1 Michelle O'Brien                |                                      | Case number (if known)                                |  |  |  |  |
|--|--------------------------------------|---|--|--|--|--|
| Po Box 8588<br>Round Rock, TX 78683      | Last 4 digits of account number      | Part 2: Creditors with Nonpriority Unsecured Claims   |  |  |  |  |
| Name and Address                         | On which entry in Part 1 or Part 2 d | ,   |  |  |  |  |
| Weltman, Weinberg & Reis Co.             | Line 4.2 of (Check one):             | ☐ Part 1: Creditors with Priority Unsecured Claims    |  |  |  |  |
| POB 93784<br>Cleveland, OH 44101         |                                      | ■ Part 2: Creditors with Nonpriority Unsecured Claims |  |  |  |  |
| Cieveland, On 44101                      | Last 4 digits of account number      | 9790  |  |  |  |  |
| Name and Address                         | On which entry in Part 1 or Part 2 d | lid you list the original creditor?                   |  |  |  |  |
| Weltman, Weinberg & Reis Co.             | Line 4.2 of (Check one):             | ☐ Part 1: Creditors with Priority Unsecured Claims    |  |  |  |  |
| 323 West Lakeside Avenue<br>Ste 200      |                                      | ■ Part 2: Creditors with Nonpriority Unsecured Claims |  |  |  |  |
| Cleveland, OH 44113                      |                                      |   |  |  |  |  |
| ·  | Last 4 digits of account number      | 9790  |  |  |  |  |
| Name and Address                         | On which entry in Part 1 or Part 2 d | lid you list the original creditor?                   |  |  |  |  |
| Weltman, Weinberg & Reis Co.             | Line 4.6 of (Check one):             | ☐ Part 1: Creditors with Priority Unsecured Claims    |  |  |  |  |
| 170 South Independence Mall West Ste 874 |                                      | ■ Part 2: Creditors with Nonpriority Unsecured Claims |  |  |  |  |
| Philadelphia, PA 19106                   |                                      |   |  |  |  |  |
| r .,                                     | Last 4 digits of account number      |   |  |  |  |  |

## Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|                       |     |   |     | Total Claim     |
|-----------------------|-----|---|-----|-----------------|
|                       | 6a. | Domestic support obligations  | 6a. | \$<br>0.00      |
| Total claims          |     |   |     |                 |
| from Part 1           | 6b. | Taxes and certain other debts you owe the government                              | 6b. | \$<br>0.00      |
|                       | 6c. | Claims for death or personal injury while you were intoxicated                    | 6c. | \$<br>0.00      |
|                       | 6d. | Other. Add all other priority unsecured claims. Write that amount here.           | 6d. | \$<br>0.00      |
|                       | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$<br>0.00      |
|                       |     |   |     | Total Claim     |
| Total                 | 6f. | Student loans   | 6f. | \$<br>0.00      |
| claims<br>from Part 2 | 6a. | Obligations arising out of a separation agreement or divorce that                 |     |                 |
|                       | - 3 | you did not report as priority claims   | 6g. | \$<br>0.00      |
|                       | 6h. | Debts to pension or profit-sharing plans, and other similar debts                 | 6h. | \$<br>0.00      |
|                       | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$<br>27,188.10 |
|                       | 6j. | Total Nonpriority. Add lines 6f through 6i.                                       | 6j. | \$<br>27,188.10 |

| Fill in this infor  |                          |                    |              |  |   |                                    |
|---------------------|--------------------------|--------------------|--------------|--|---|------------------------------------|
| Debtor 1            | Michelle O'Brien         |                    |              |  |   |                                    |
|                     | First Name               | Middle Name        | Last Name    |  |   |                                    |
| Debtor 2            |                          |                    |              |  |   |                                    |
| (Spouse if, filing) | First Name               | Middle Name        | Last Name    |  |   |                                    |
| United States Ba    | ankruptcy Court for the: | MIDDLE DISTRICT OF | PENNSYLVANIA |  |   |                                    |
| Case number         |                          |                    |              |  |   |                                    |
| (if known)          |                          |                    |              |  | _ | Check if this is an amended filing |

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | company with | n whom you have the<br>er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|--|-------------------|---|
| 2.1 |           |              |  |                   |   |
|     | Name      |              |  |                   | <del>_</del>                            |
|     |           |              |  |                   |   |
|     | Number    | Street       |  |                   | <del>_</del>                            |
|     |           |              |  |                   |   |
|     | City      |              | State  | ZIP Code          |   |
| 2.2 |           |              |  |                   |   |
|     | Name      |              |  |                   |   |
|     |           |              |  |                   |   |
|     | Number    | Street       |  |                   |   |
|     |           |              |  |                   |   |
|     | City      |              | State  | ZIP Code          |   |
| 2.3 |           |              |  |                   |   |
|     | Name      |              |  |                   |   |
|     |           |              |  |                   |   |
|     | Number    | Street       |  |                   |   |
|     |           |              |  |                   |   |
|     | City      |              | State  | ZIP Code          |   |
| 2.4 |           |              |  |                   |   |
|     | Name      |              |  |                   |   |
|     |           |              |  |                   |   |
|     | Number    | Street       |  |                   |   |
|     |           |              |  |                   |   |
|     | City      |              | State  | ZIP Code          |   |
| 2.5 |           |              |  |                   |   |
|     | Name      |              |  |                   |   |
|     |           |              |  |                   |   |
|     | Number    | Street       |  |                   | <u> </u>                                |
|     |           |              |  |                   |   |
|     | City      |              | State  | ZIP Code          | <del>_</del>                            |
|     |           |              |  |                   |   |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Desc

|                        | is information to identify you  |                                |                         |   |   |
|------------------------|---|--------------------------------|-------------------------|---|---|
|                        | is information to identify you  | case.                          |                         |   |   |
| Debtor 1               | Michelle O'Brien  | Middle Name                    | Last Name               |   |   |
| Debtor 2               | First Name  | Middle Name                    | Last Name               |   |   |
| (Spouse if, fi         | First Name  | Middle Name                    | Last Name               |   |   |
| United St              | tates Bankruptcy Court for the:   | MIDDLE DISTRICT OF             | PENNSYLVANIA            |   |   |
| Case nun<br>(if known) | mber  |                                |                         |   | ☐ Check if this is an amended filing                          |
| Officia                | al Form 106H  |                                |                         |   | G   |
|                        | dule H: Your Cod  | lahtors                        |                         |   | 12/15   |
| <u> </u>               | dule II. Toul Cot   | ienioi s                       |                         |   | 12/13   |
|                        | ne and case number (if knowr  |                                |                         | as a codebtor.  |   |
| ■ No                   | <del>-</del>  |                                |                         |   |   |
|                        | ithin the last 8 years, have yo<br>ona, California, Idaho, Louisiana    |                                |                         |   | tes and territories include                                   |
| ■ No                   | o. Go to line 3.  |                                |                         |   |   |
| □ Ye                   | es. Did your spouse, former spo   | ouse, or legal equivalent live | with you at the time?   |   |   |
| in lin                 | ne 2 again as a codebtor only   | if that person is a guarant    | or or cosigner. Make    | sure you have listed the ci   | th you. List the person shown                                 |
|                        |   |                                | ule G (Official Form 10 | ooj. Ose Schedule D, Sch  |   |
|                        | Column 1: Your codebtor<br>Name, Number, Street, City, State and        | ZIP Code                       | ule G (Official Form 10 | ,   | edule E/F, or Schedule G to fil<br>r to whom you owe the debt |
| out (                  |   | ZIP Code                       | ule G (Official Form 10 | Column 2: The credito<br>Check all schedules the  | edule E/F, or Schedule G to fil<br>r to whom you owe the debt |
|                        |   | ZIP Code                       | ule G (Official Form 10 | Column 2: The creditor Check all schedules the  | edule E/F, or Schedule G to fil<br>r to whom you owe the debt |
| out (                  | Name, Number, Street, City, State and                                   | ZIP Code                       | ule G (Official Form 10 | Column 2: The credito<br>Check all schedules the  | edule E/F, or Schedule G to fil<br>r to whom you owe the debt |
| out (                  | Name, Number, Street, City, State and                                   | ZIP Code                       | ule G (Official Form 10 | Column 2: The credito Check all schedules th:  ☐ Schedule D, line ☐ Schedule E/F, line  | edule E/F, or Schedule G to fil<br>r to whom you owe the debt |
| out (                  | Name, Number, Street, City, State and A                                 | ZIP Code                       | ule G (Official Form 10 | Column 2: The credito Check all schedules th:  ☐ Schedule D, line ☐ Schedule E/F, line  | edule E/F, or Schedule G to fil<br>r to whom you owe the debt |
| out (                  | Name, Number, Street, City, State and Street  Name  Street              |                                | `                       | Column 2: The credito Check all schedules th:  ☐ Schedule D, line ☐ Schedule E/F, line  | edule E/F, or Schedule G to fil<br>r to whom you owe the debt |
| 3.1                    | Name, Number, Street, City, State and Street  Name  Street              |                                | `                       | Column 2: The creditor Check all schedules the Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule E/F, line | edule E/F, or Schedule G to fil<br>r to whom you owe the debt |
| 3.1                    | Name, Number, Street, City, State and Street  Name  Number Street  City |                                | `                       | Column 2: The creditor Check all schedules the Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line                    | edule E/F, or Schedule G to fil<br>r to whom you owe the debt |

Schedule H: Your Codebtors

| Fill               | in this information to identify your ca  | ase:                          |   |                        |                 |                             |              |                      |                                  |                 |
|--------------------|--|-------------------------------|---|------------------------|-----------------|-----------------------------|--------------|----------------------|----------------------------------|-----------------|
| Del                | btor 1 Michelle O'E  | Brien                         |   |                        | _               |                             |              |                      |                                  |                 |
|                    | btor 2<br>puse, if filing)   |                               |   |                        | _               |                             |              |                      |                                  |                 |
| Uni                | ited States Bankruptcy Court for the   | : MIDDLE DISTRICT O           | F PENNSYLVANIA                                      |                        | _               |                             |              |                      |                                  |                 |
|                    | se number<br>nown)   |                               |   |                        |                 |                             | nded<br>mer  | t show               | ing postpetition following date: |                 |
| 0                  | fficial Form 106I  |                               |   |                        |                 | MM / DI                     |              |                      | J                                |                 |
|                    | chedule I: Your Inc  | ome                           |   |                        |                 | IVIIVI / DE                 | " I I        |                      |                                  | 12/15           |
| sup<br>spo<br>atta | as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment | are married and not filing wi | ng jointly, and your s<br>th you, do not includ     | spouse is<br>de inforn | s livi<br>natio | ing with you, in about your | iclu<br>spou | de info<br>ise. If n | rmation about<br>nore space is   | your<br>needed, |
| 1.                 | Fill in your employment information.   |                               | Debtor 1  |                        |                 | Debte                       | or 2 (       | or non-              | -filing spouse                   |                 |
|                    | If you have more than one job, attach a separate page with information about additional  | Employment status             | <ul><li>☐ Employed</li><li>■ Not employed</li></ul> |                        |                 | □ Er                        |              | red<br>ployed        |                                  |                 |
|                    | employers.   | Occupation                    |   |                        |                 |                             |              |                      |                                  |                 |
|                    | Include part-time, seasonal, or self-employed work.  | Employer's name               |   |                        |                 |                             |              |                      |                                  |                 |
|                    | Occupation may include student or homemaker, if it applies.  | Employer's address            |   |                        |                 |                             |              |                      |                                  |                 |
|                    |  | How long employed th          | nere?   |                        |                 |                             |              |                      |                                  |                 |
| Pai                | rt 2: Give Details About Mor   | nthly Income                  |   |                        |                 |                             |              |                      |                                  |                 |
|                    | mate monthly income as of the duse unless you are separated.   | ate you file this form. If y  | ou have nothing to re                               | eport for a            | any I           | ine, write \$0 in           | he s         | pace. I              | nclude your no                   | n-filing        |
|                    | ou or your non-filing spouse have mo<br>e space, attach a separate sheet to  |                               | mbine the information                               | n for all e            | mplo            | yers for that pe            | rson         | on the               | lines below. If                  | you need        |
|                    |  |                               |   |                        |                 | For Debtor 1                |              |                      | ebtor 2 or<br>iling spouse       |                 |
| 2.                 | List monthly gross wages, sala deductions). If not paid monthly,   |                               |   | 2.                     | \$              | 0.0                         | 0_           | \$                   | N/A                              |                 |
| 3.                 | Estimate and list monthly overt  | ime pay.                      |   | 3.                     | +\$             | 0.0                         | 0_           | +\$_                 | N/A                              |                 |
| 4.                 | Calculate gross Income. Add lin  | ne 2 + line 3.                |   | 4.                     | \$              | 0.00                        |              | \$_                  | N/A                              |                 |

Official Form 106I Schedule I: Your Income page 1

|     |               |   |        | Fo  | r Debtor 1    | For Debt     |                   |                |
|-----|---------------|---|--------|-----|---------------|--------------|-------------------|----------------|
|     | C             | . Une 4 hours   | 4      | Φ.  | 0.00          |              | g spouse          |                |
|     | Copy          | y line 4 here   | 4.     | \$_ | 0.00          | \$           | N/A               |                |
| 5.  | List          | all payroll deductions:   |        |     |               |              |                   |                |
|     | 5a.           | Tax, Medicare, and Social Security deductions   | 5a.    | \$  | 0.00          | \$           | N/A               |                |
|     | 5b.           | Mandatory contributions for retirement plans  | 5b.    | \$  | 0.00          | \$           | N/A               |                |
|     | 5c.           | Voluntary contributions for retirement plans  | 5c.    | \$  | 0.00          | \$           | N/A               |                |
|     | 5d.           | Required repayments of retirement fund loans  | 5d.    | \$  | 0.00          | \$           | N/A               | •              |
|     | 5e.           | Insurance   | 5e.    | \$  | 0.00          | \$           | N/A               |                |
|     | 5f.           | Domestic support obligations  | 5f.    | \$  | 0.00          | \$           | N/A               |                |
|     | 5g.           | Union dues  | 5g.    | \$  | 0.00          | \$           | N/A               |                |
|     | 5h.           | Other deductions. Specify:  | 5h.+   | \$  | 0.00          | + \$         | N/A               |                |
| 6.  | Add           | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.     | \$  | 0.00          | \$           | N/A               |                |
| 7.  | Calc          | ulate total monthly take-home pay. Subtract line 6 from line 4.   | 7.     | \$  | 0.00          | \$           | N/A               |                |
| 8.  | List a<br>8a. | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a.    | \$_ | 0.00          | \$           | N/A               |                |
|     | 8b.           | Interest and dividends  | 8b.    | \$_ | 0.00          | \$           | N/A               |                |
|     | 8c.           | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  | 8c.    | \$_ | 0.00          | \$           | N/A               |                |
|     | 8d.           | Unemployment compensation   | 8d.    | \$_ | 0.00          | \$           | N/A               |                |
|     | 8e.           | Social Security   | 8e.    | \$_ | 2,220.00      | \$           | N/A               |                |
|     | 8f.           | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:          | 8f.    | \$_ | 0.00          | \$           | N/A               |                |
|     | 8g.           | Pension or retirement income  | 8g.    | \$_ | 0.00          | \$           | N/A               |                |
|     | 8h.           | Other monthly income. Specify: Son's social security  | _ 8h.+ | \$  | 1,110.00      | + \$         | N/A               |                |
| 9.  | Add           | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.     | \$_ | 3,330.00      | \$           | N/A               | <u> </u>       |
| 10. |               | ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   | 10. \$ |     | 3,330.00 + \$ | N/           | <b>/A</b> = \$    | 3,330.00       |
| 11. | Include other | e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. or include any amounts already included in lines 2-10 or amounts that are not stify:              | depen  |     |               | ted in Sched | dule J.<br>1. +\$ | 0.00           |
| 12. |               | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines  |        |     |               | a, if it     | 2. \$             | 3,330.00       |
| 13. | Do y          | ou expect an increase or decrease within the year after you file this form  | ?      |     |               |              | Combin<br>monthly | ed<br>y income |
|     |               | No.   |        |     |               |              |                   |                |

Official Form 106l Schedule I: Your Income page 2

| Debtor 1 Michelle O'Brien  Debtor 2   A supplement showing paspetition chapter (Spoose, #filing)   A supplement showing paspetition chapter (Spoose, #filin |            |  |  |                                       |  |                       |            |                                       |                               |
|--|------------|--|--|---------------------------------------|--|-----------------------|------------|---------------------------------------|-------------------------------|
| An amended filling   | FIII       | in this informa                                  | tion to identify yo                                    | ur case:                              |  |                       |            |                                       |                               |
| Debtor 2   | Deb        | otor 1   | Michelle O'B   | rien                                  |  |                       |            |                                       |                               |
| United States Bankruptery Court for the: MIDDLE DISTRICT OF PENNSYLVANIA  Case number (If known)  Official Form 106J  Schedule J: Your Expenses  12/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (If known). Answer every question.  Part I: Describe Your Household  I Is this a joint case?  No. Go to line 2.  Yes. Deeb Debtor 2 live in a separate household?  No Do not list Debtor 1 and Pyes. Fill out this information for Debtor 2.  Do you have dependents?  Do not state the dependents ames.  Son 18 Pyes  No No Pyes  No No No Pyes  No No No Pyes  Table And Your dependents?  Yes No  | Doh        | otor 2   |  |                                       |  |                       | _          | •                                     | uing poetpetition chapter     |
| United States Bankruptcy Court for the: MIDDLE DISTRICT OF PENNSYLVANIA  Official Form 106J  Schedule J: Your Expenses  12/15  Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known), Answer every question.  Part ! Describe Your Household  1. Is this a joint case?  No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?  Yes. Does Debtor 2 live in a separate household?  No Do not list Debtor 1 and Yes.  Part I Describe Your Household  Do not list Debtor 1 and Debtor 2.  Do not state the dependents?  Do not state the dependents names.  Son 18 No Yes  No N   | 1          |  |  |                                       |  |                       | Ц          |                                       |                               |
| Official Form 106J Schedule J: Your Expenses  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Tatt 1   | Unit       | ted States Bankr                                 | uptcy Court for the:                                   | MIDDLE                                | E DISTRICT OF PENNSYI                                | _VANIA                |            |                                       |                               |
| Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part !: Describe Your Household  1. Is this a joint case?  No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?  Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  Do you have dependents?  Do not list Debtor 1 and Debtor 2.  Do not state the dependents names.  Son  18  Yes  No.  Yes  Son  No.  Yes  Stiff out this information for each dependent age  No.  Yes  No.  Yes  Son  No.  Yes  Son  No.  Yes  Son  No.  Yes  Son  No.  Yes  Stiff out this information for each dependent age  No.  No.  Yes  No.  Yes  Son  No.  Yes  Son  No.  Yes  Stiff out this information for each dependent age  No.  Yes  No.  Yes  Son  No.  Yes  Son  No.  Yes  Son  No.  Yes  Son  No.  Yes  Stiff out this information for expenses a file out the information for each dependent age  No.  Yes  No.  Yes  Son  No.  Your expenses so for people other than your dependents?  No.  Yes  Son  No.  Your expenses of people other than your dependents?  No.  Your expenses so for add a defer the bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to | Cas        | se number  |  |                                       |  |                       |            |                                       |                               |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Rant   Describe Your Household   | (If k      | nown)  |  |                                       |  |                       |            |                                       |                               |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Rant   Describe Your Household   | 0          | fficial Fo                                       | rm 106J  |                                       |  |                       |            |                                       |                               |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part 12  |            |  |  | Exper                                 | 1888   |                       |            |                                       | 12/15                         |
| Is this a joint case?   No. Go to line 2.   Yes. Does Debtor 2 live in a separate household?   No  | Be<br>info | as complete a<br>ormation. If m<br>mber (if know | and accurate as<br>ore space is ned<br>n). Answer ever | possible.<br>eded, atta<br>y question | If two married people ar<br>ch another sheet to this |                       |            |                                       | or supplying correct          |
| No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?  Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  Do you have dependents?  No  Do not list Debtor 1 and Debtor 2.  Do not state the dependents names.  Fill out this information for each dependent   |            |  |  | hold                                  |  |                       |            |                                       |                               |
| No   Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  2. Do you have dependents?   No   Dependent's relationship to Debtor 1 and Debtor 2.    Do not list Debtor 1 and Debtor 2.   Pyes. Fill out this information for Debtor 1 or Debtor 2.   Do not state the dependents names.   Son   18   Pyes   No   Yes   Yes   No   Yes    | 1.         | No. Go to  | line 2.  | n a senar                             | ata housahold?                                       |                       |            |                                       |                               |
| Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  2. Do you have dependents?   No   Do not list Debtor 1 and Debtor 2.    Do not list Debtor 1 and Debtor 2.   Do not state the dependent snames.   Fill out this information for each dependent   |            |  |  | ii a sepai                            | ate nousenoia:                                       |                       |            |                                       |                               |
| Do not list Debtor 1 and Debtor 2.  Do not state the dependents names.  Does dependent seach dependent   |            | = ::   | _  | t file Offici                         | al Form 106J-2, <i>Expenses</i>                      | for Separate House    | hold of De | btor 2.                               |                               |
| Debtor 2.  Do not state the dependents names.  Son 18  | 2.         | Do you have                                      | e dependents?  | □ No                                  |  |                       |            |                                       |                               |
| dependents names.  Son  18  Yes  No  Yes  Son  18  Yes  No  Yes  Som  No  Yes  No  No  Your expenses as of a date after the bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I</i> : Your Income  (Official Form 106L)  4. \$ 550.00  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4b. \$ 0.00  4d. Home maintenance, repair, and upkeep expenses  4d. \$ 0.00  4d. Home maintenance, repair, and upkeep expenses  4d. \$ 0.00  Ad. Homeowner's association or condominium dues  |            |  | ebtor 1 and  | Yes.                                  |  |                       |            |                                       | Does dependent live with you? |
| 3. Do your expenses include expenses of people other than yourself and your dependents?    Part 2:   |            | Do not state                                     | the  |                                       |  |                       |            |                                       | □ No                          |
| 3. Do your expenses include expenses of people other than yourself and your dependents?  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$ 0.00  4d. Homeowner's association or condominium dues  4d. \$ 0.00  |            | dependents                                       | names.   |                                       |  | Son                   |            | 18                                    | Yes                           |
| 3. Do your expenses include expenses of people other than yourself and your dependents?    Part 2:   Estimate Your Ongoing Monthly Expenses  |            |  |  |                                       |  |                       |            |                                       |                               |
| 3. Do your expenses include expenses of people other than yourself and your dependents? No expenses of people other than yourself and your dependents? Yes  Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filled. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4a. \$  0.00  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$  0.00  4d. Homeowner's association or condominium dues  4d. \$  0.00   |            |  |  |                                       |  |                       |            |                                       |                               |
| 3. Do your expenses include expenses of people other than yourself and your dependents?  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4a. \$ 0.00  4b. Property, homeowner's, or renter's insurance  4c. \$ 0.00  4d. Home maintenance, repair, and upkeep expenses  4d. \$ 0.00  4d. Homeowner's association or condominium dues  |            |  |  |                                       |  |                       |            |                                       |                               |
| 3. Do your expenses include expenses of people other than yourself and your dependents?  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4a. \$  0.00  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$  0.00  4d. Homeowner's association or condominium dues   |            |  |  |                                       |  | -                     |            |                                       |                               |
| expenses of people other than yourself and your dependents?    Part 2:   |            |  |  |                                       |  |                       |            |                                       | — · · ·                       |
| Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$  0.00  4d. Homeowner's association or condominium dues   | 3.         | expenses of                                      | f people other th                                      | nan $_{f \Box}$                       |  |                       |            |                                       |                               |
| expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  4. \$ 550.00  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$ 0.00  4d. Homeowner's association or condominium dues  |            |  |  |                                       |  |                       |            |                                       |                               |
| the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues  Your expenses  4 \$ 550.00   | exp        | penses as of a                                   |  |                                       |  |                       |            |                                       |                               |
| 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. Homeowner's association or condominium dues  550.00  4a. \$  0.00  4b. \$  0.00  4c. Homeowner's association or condominium dues   | the        | value of such                                    | h assistance and                                       |                                       |  |                       |            | Your exp                              | enses                         |
| payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues  4. \$  550.00  4a. \$  0.00  4b. \$  0.00  4c. Homeowner's association or condominium dues  4d. \$  0.00  4d. \$  0.00   | ,51        | 1 0/11/ 10                                       | ···,   |                                       |  |                       |            | , , , , , , , , , , , , , , , , , , , |                               |
| 4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. Homeowner's association or condominium dues  4d. \$  0.00  4d. \$  0.00  4d. \$  0.00  | 4.         |  |  |                                       | -  | nclude first mortgage | e<br>4.    | \$                                    | 550.00                        |
| 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$  0.00  4d. \$  0.00  |            | If not includ                                    | led in line 4:   |                                       |  |                       |            |                                       |                               |
| 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$  0.00  0.00   |            | 4a. Real e                                       | estate taxes   |                                       |  |                       | 4a.        | \$                                    | 0.00                          |
| 4d. Homeowner's association or condominium dues 4d. \$ 0.00  |            | •  | •  |                                       |  |                       |            | :                                     |                               |
| ·  |            |  |  |                                       |  |                       |            |                                       |                               |
|  | 5.         |  |  |                                       |  | me equity loans       |            | ·                                     |                               |

Official Form 106J Schedule J: Your Expenses page 1

| Deb | or 1 Michelle O'Brien   | Case num     | ber (if known) |                               |
|-----|---|--------------|----------------|-------------------------------|
| 6.  | Utilities:  |              |                |                               |
| ٥.  | 6a. Electricity, heat, natural gas  | 6a.          | \$             | 349.40                        |
|     | 6b. Water, sewer, garbage collection  | 6b.          | \$             | 0.00                          |
|     | 6c. Telephone, cell phone, Internet, satellite, and cable services  | 6c.          | ·              | 233.52                        |
|     | 6d. Other. Specify:   | 6d.          | ·              | 0.00                          |
| 7.  | Food and housekeeping supplies  | — 7.         | ·              | 700.00                        |
| 8.  | Childcare and children's education costs  | 8.           | ·              | 0.00                          |
| 9.  |   | 9.           |                |                               |
| -   | Clothing, laundry, and dry cleaning   |              |                | 150.00                        |
|     | Personal care products and services   | 10.          | · <u> </u>     | 65.00                         |
|     | Medical and dental expenses   | 11.          | \$             | 375.00                        |
| 12. | <b>Transportation.</b> Include gas, maintenance, bus or train fare.   | 12.          | \$             | 255.00                        |
| 12  | Do not include car payments.  Entertainment, clubs, recreation, newspapers, magazines, and books  | 13.          |                |                               |
|     |   |              |                | 20.00                         |
|     | Charitable contributions and religious donations  | 14.          | Ф              | 0.00                          |
| 15. | Insurance.  |              |                |                               |
|     | Do not include insurance deducted from your pay or included in lines 4 or 20.   | 45-          | •              | 0.00                          |
|     | 15a. Life insurance   | 15a.         |                | 0.00                          |
|     | 15b. Health insurance   | 15b.         | ·              | 0.00                          |
|     | 15c. Vehicle insurance  | 15c.         | ·              | 213.17                        |
|     | 15d. Other insurance. Specify:  | 15d.         | \$             | 0.00                          |
| 16. | <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.   |              |                |                               |
|     | Specify: per capita - school  | 16.          | \$             | 18.43                         |
|     | Specify: per capita - county/municipal  |              | \$             | 2.00                          |
| 17. | Installment or lease payments:  |              |                |                               |
|     | 17a. Car payments for Vehicle 1   | 17a.         | \$             | 0.00                          |
|     | 17b. Car payments for Vehicle 2   | 17b.         | \$             | 0.00                          |
|     | 17c. Other. Specify:  | 17c.         | ·              | 0.00                          |
|     | 17d. Other. Specify:  | 17d.         | ·              |                               |
| 40  | · · ·   |              | Φ              | 0.00                          |
| 18. | Your payments of alimony, maintenance, and support that you did not report as   |              | \$             | 0.00                          |
| 10  | deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). Other payments you make to support others who do not live with you.  |              | \$             |                               |
| 19. |   | 40           | Ψ              | 0.00                          |
| 20  | Specify:  Other real property expenses not included in lines 4 or 5 of this form or on Sch  | 19.          | our Incomo     |                               |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on <i>School</i> 20a. Mortgages on other property   | 20a.         |                | 0.00                          |
|     |   | 20a.<br>20b. | · ·            | 0.00                          |
|     | 20b. Real estate taxes  |              | ·              | 0.00                          |
|     | 20c. Property, homeowner's, or renter's insurance   | 20c.         | ·              | 0.00                          |
|     | 20d. Maintenance, repair, and upkeep expenses   | 20d.         | · -            | 0.00                          |
|     | 20e. Homeowner's association or condominium dues  | 20e.         | \$             | 0.00                          |
| 21. | Other: Specify: Micellaneous  | 21.          | +\$            | 275.00                        |
|     | 2 dogs - fixed, food and vet service  |              | +\$            | 60.00                         |
|     | Son's cell phone  |              | +\$            | 50.00                         |
|     | set aside for college applications & expenses   |              | +\$            | 120.00                        |
|     | oct dolde for conlege approacions a expenses  |              |                | 120.00                        |
| 22. | Calculate your monthly expenses   |              |                |                               |
|     | 22a. Add lines 4 through 21.  |              | \$             | 3,436.52                      |
|     | 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  |              | \$             |                               |
|     | 22c. Add line 22a and 22b. The result is your monthly expenses.   |              | \$             | 3,436.52                      |
|     | 220. Add line 22d drid 22b. The result to your monarty expenses.  |              | Ψ              | 3,430.32                      |
| 23. | Calculate your monthly net income.  |              | _              |                               |
|     | 23a. Copy line 12 (your combined monthly income) from Schedule I.   | 23a.         | \$             | 3,330.00                      |
|     | 23b. Copy your monthly expenses from line 22c above.  | 23b.         | -\$            | 3,436.52                      |
|     |   |              |                |                               |
|     | 23c. Subtract your monthly expenses from your monthly income.  The result is your <i>monthly net income</i> .   | 23c.         | \$             | -106.52                       |
| 24. | Do you expect an increase or decrease in your expenses within the year after your example, do you expect to finish paying for your car loan within the year or do you expect your modification to the terms of your mortgage?  ■ No. □ Yes. Explain here: |              |                | ease or decrease because of a |
|     |   |              |                |                               |

| Fill in this inf                | ormation to identify your                            | case.                    |                                |  |
|---------------------------------|--|--------------------------|--------------------------------|--|
| Debtor 1                        |  | ouse.                    |                                |  |
| Deblor I                        | Michelle O'Brien First Name                          | Middle Name              | Last Name                      |  |
| Debtor 2                        |  |                          |                                |  |
| (Spouse if, filing)             | First Name   | Middle Name              | Last Name                      |  |
| United States                   | Bankruptcy Court for the:                            | MIDDLE DISTRICT OF       | PENNSYLVANIA                   |  |
| Case number<br>(if known)       |  |                          |                                | ☐ Check if this is an  |
|                                 |  |                          |                                | amended filing   |
| obtaining mor<br>rears, or both |  | n connection with a ban  |                                | aking a false statement, concealing property, or nes up to \$250,000, or imprisonment for up to 20 |
| Did you                         |  | one who is NOT an atto   | rney to help you fill out banl | cruptcy forms?   |
| ■ No                            |  |                          |                                |  |
| ☐ Yes                           | . Name of person                                     |                          |                                | Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119)      |
|                                 | nalty of perjury, I declare<br>are true and correct. | that I have read the sun | nmary and schedules filed w    | ith this declaration and   |
| X /s/ M                         | lichelle O'Brien                                     |                          | Х                              |  |
| Mich                            | nelle O'Brien<br>ature of Debtor 1                   |                          | Signature of Del               | otor 2   |
| Date                            | March 30, 2020                                       |                          | Date                           |  |
|                                 |  |                          | <del></del>                    |  |

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

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| Fill               | in this infor                           | mation to identify you            | r case:  |              |  |                                    |               |   |
|--------------------|---|-----------------------------------|--|--------------|--|------------------------------------|---------------|---|
| Del                | otor 1                                  | Michelle O'Brier                  | 1  |              |  |                                    |               |   |
|                    |   | First Name                        | Middle Name  | L            | ast Name                               | _                                  |               |   |
|                    | otor 2<br>ouse if, filing)              | First Name                        | Middle Name  | L            | ast Name                               |                                    |               |   |
| Uni                | ted States Ba                           | ankruptcy Court for the:          | MIDDLE DISTRICT OF F   | PENNSYL      | VANIA                                  |                                    |               |   |
|                    | se number<br>nown)                      |                                   |  |              |  |                                    | _             | heck if this is an<br>mended filing                   |
| Sta<br>Be a        | atement<br>as complete<br>rmation. If r | and accurate as poss              | Affairs for Individual liberal | are filing   | together, both are                     | equally respons                    | ible for supp |   |
|                    | <u> </u>                                |                                   | rital Status and Where You   | u Lived B    | efore                                  |                                    |               |   |
| 1.                 | What is you                             | ır current marital statı          | ıs?  |              |  |                                    |               |   |
|                    | ☐ Married ■ Not ma                      |                                   |  |              |  |                                    |               |   |
| 2.                 | During the                              | last 3 years, have you            | lived anywhere other than  | where ye     | ou live now?                           |                                    |               |   |
|                    | ■ No □ Yes. Li                          | st all of the places you          | ived in the last 3 years. Do n   | not include  | where you live now                     | ·.                                 |               |   |
|                    | Debtor 1 P                              | rior Address:                     | Dates Debtor 1 lived there   |              | Debtor 2 Prior Ad                      | dress:                             |               | Dates Debtor 2<br>lived there                         |
| <b>3.</b><br>state |   |                                   | ver live with a spouse or legistronia, Idaho, Louisiana, Ne  |              |  |                                    |               |   |
|                    | ■ No □ Yes. M                           | ake sure you fill out <i>Sc</i> . | nedule H: Your Codebtors (O  | Official For | m 106H).                               |                                    |               |   |
| Par                | t 2 Expla                               | in the Sources of You             | r Income   |              |  |                                    |               |   |
| 4.                 | Fill in the tot                         | al amount of income yo            | nployment or from operatir<br>u received from all jobs and<br>have income that you receiv  | all busine   | sses, including part-                  | time activities.                   | evious calen  | dar years?  |
|                    | ■ No<br>□ Yes. Fi                       | II in the details.                |  |              |  |                                    |               |   |
|                    |   |                                   | Debtor 1   |              |  | Debtor 2                           |               |   |
|                    |   |                                   | Sources of income<br>Check all that apply.   |              | s income<br>e deductions and<br>sions) | Sources of inc<br>Check all that a |               | Gross income<br>(before deductions<br>and exclusions) |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Desc

| 5. | Include include and other     | come regard<br>public bene   | dless of wheth<br>fit payments;   | er that income pensions; renta   | is taxable. Exampl<br>Il income; interest;   | evious calendar years?<br>es of other income are a<br>dividends; money collec-<br>received together, list it of                                       | alimony; child supported from lawsuits;   | royalties; and                             |   |
|----|-------------------------------|------------------------------|---|--|--|---|---|--|---|
|    | List each s                   | source and t                 | the aross inco  | me from each s   | source separately.   | Do not include income t   | that vou listed in lin  | e 4.                                       |   |
|    | _                             | ,                            | e g. eeeee  |  | oouree eeparately:   | 20 1101 111011110 111001110   |   |  |   |
|    | □ No                          | <b>-</b>                     |   |  |  |   |   |  |   |
|    | ■ Yes.                        | Fill in the de               | etaiis.   |  |  |   |   |  |   |
|    |                               |                              |   | Debtor 1<br>Sources of in  |  | Fross income from   | Debtor 2<br>Sources of inco   |  | Gross income                                      |
|    |                               |                              |   | Describe belo  | w. e   | ach source pefore deductions and xclusions)   | Describe below.   |  | (before deductions and exclusions)                |
|    | om January<br>e date you f    |                              | nt year until<br>nkruptcy:  | Social Secu<br>Benefits  | ırity  | \$6,660.00  |   |  |   |
|    | r last calen<br>anuary 1 to   |                              | 31, 2019 )  | Social Secu<br>Benefits  | ırity  | \$26,220.00   |   |  |   |
|    | r the calen                   |                              |   | Retirement   | Income   | \$1,940.00  |   |  |   |
| 6. | □ No.                         | During the No. Yes           | 90 days before Go to line 7 List below expaid that crunot include to adjustment or Debtor 2 or Go to line 7 List below expaid that crunot include to adjustment or Debtor 2 or Go to line 7 List below expaid that crunot include to adjustment or Debtor 2 or Go to line 7 | personal, family personal, family personal, family personal, family personal, family personal | bankruptcy, did yo whom you paid a t nclude payments for attorney for this b d every 3 years aft imarily consumer bankruptcy, did yo whom you paid a t | r debts. Consumer debtarpose."  u pay any creditor a totator of \$6,825* or more or domestic support obligankruptcy case.  er that for cases filed on | al of \$6,825* or more pay gations, such as che or after the date of al of \$600 or more? | e? ments and thild support and adjustment. | e total amount you<br>d alimony. Also, do         |
|    | Creditor                      | s Name an                    | •   | this bankruptcy  | case.  | Total amount  | Amount you  | Was this n                                 | ayment for  |
|    | Creditor                      | 5 Name and                   | u Auuress   | Da   | ites of payment  | paid  | still owe   | was uns pe                                 | ayment for  |
| 7. | <i>Insiders</i> in of which y | clude your r<br>ou are an of | elatives; any ficer, director   | general partner<br>, person in cont  | rs; relatives of any<br>rol, or owner of 20  | yment on a debt you o<br>general partners; partne<br>% or more of their voting<br>payments for domestic   | erships of which you<br>g securities; and an  | u are a gener<br>y managing a              | al partner; corporations agent, including one for |
|    | ☐ Yes.                        | List all payn                | nents to an in  | sider.   |  |   |   |  |   |
|    | Insider's                     | Name and                     | Address   | Da   | ites of payment  | Total amount paid   | Amount you still owe  | Reason for                                 | this payment                                      |
|    |                               |                              |   |  |  |   |   |  |   |

Case number (if known)

Official Form 107

Debtor 1 Michelle O'Brien

Statement of Financial Affairs for Individuals Filing for Bankruptcy

| 8.  | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos   |  | ments or transfer a   | any property on      | account of a d               | ebt that benefited an        |  |
|-----|--|--|---|----------------------|------------------------------|------------------------------|--|
|     | ■ No   |  |   |                      |                              |                              |  |
|     | ☐ Yes. List all payments to an insider   |  |   |                      |                              |                              |  |
|     | Insider's Name and Address   | Dates of payment                                     | Total amount paid   | Amount you still owe | Reason for<br>Include cred   | this payment<br>ditor's name |  |
| Pa  | rt 4: Identify Legal Actions, Repossession   | ns, and Foreclosures                                 |   |                      |                              |                              |  |
| 9.  | Within 1 year before you filed for bankrupt<br>List all such matters, including personal injury<br>modifications, and contract disputes. |  |   |                      |                              |                              |  |
|     | <ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>   |  |   |                      |                              |                              |  |
|     | Case title Case number   | Nature of the case                                   | Court or agency   |                      | Status of the                | ne case                      |  |
|     | Discover Financial vs. Michelle<br>O'Brien<br>CV-205-2019  | Civil Complaint                                      | MDJ Plachko<br>Borough Build<br>2nd Floor<br>Port Carbon, P | •                    | ☐ Pending ☐ On appe          | eal                          |  |
|     |  |  | ,   |                      | Judgmen                      | t                            |  |
|     | <ul><li>No. Go to line 11.</li><li>Yes. Fill in the information below.</li><li>Creditor Name and Address</li></ul>                       | Describe the Property                                |   | Date                 | е                            | Value of the property        |  |
|     |  | Explain what happened                                | i   |                      |                              | ртороту                      |  |
|     | Huntingdon<br>5555 Cleveland Avenue<br>GW2W21  | 2014 Hyundai Sonata  ■ Property was repossessed.     |   |                      | September \$6,250.79<br>2018 |                              |  |
|     | Columbus, OH 43231   | ☐ Property was foreclosed. ☐ Property was garnished. |   |                      |                              |                              |  |
|     |  | ☐ Property was attached                              | d, seized or levied.  |                      |                              |                              |  |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment bec ■ No □ Yes. Fill in the details.                    |  | luding a bank or fir  | nancial institutio   | on, set off any              | amounts from your            |  |
|     | Creditor Name and Address  | Describe the action the                              | creditor took   | Date<br>take         | e action was                 | Amount                       |  |
| 12. | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a  ■ No □ Yes                                      |  | erty in the possess   | ion of an assign     | ee for the ben               | efit of creditors, a         |  |

Case number (if known)

Official Form 107

Debtor 1 Michelle O'Brien

Statement of Financial Affairs for Individuals Filing for Bankruptcy

| er person?                  | an \$600 per person?                                    |
|-----------------------------|---|
|                             | Dates you gave the gifts                                |
|                             |   |
| nore than \$600 to any cl   | value of more than \$600 to any ch                      |
|                             | Dates you contributed                                   |
|                             |   |
| use of theft, fire, other d | ning because of theft, fire, other di                   |
|                             |   |
| our Value of pr             | Date of your Value of proloss                           |
|                             |   |
| nkruptcy.                   | r transfer any property to anyone y in your bankruptcy. |
|                             | Date payment Amo<br>or transfer was pa<br>made          |
| 15,                         | March 15,<br>2020                                       |
| 3, \$1,5                    | March 13, \$1,5<br>2020                                 |
| paynsf<br>h 1               | Date por trainmade  Marci 2020                          |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Michelle O'Brien Case number (if known)

| Reference  |   |   |                        |                    |                 |                         |   |
|--|---|---|------------------------|--------------------|-----------------|-------------------------|---|
| Yes. Fill in the details.   Person Who Was Paid   Description and value of any property   Date payment or transfer was made  | 17.   | promised to help you deal with your creditors of  | or to make payments    |                    |                 | r transfer any propert  | ty to anyone who                              |
| Reference  |   | _   |                        |                    |                 |                         |   |
| transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the graining of a security interest or mortgage on your property). Describe the graining of a security interest or mortgage on your property). Describe and transfers that you have already listed on this statement.    No  |   |   |                        | alue of any prop   | erty            | or transfer was         | Amount of payment                             |
| Person Who Received Transfer Address Person's relationship to you  Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which yo beneficiary? (These are often called assel-protection devices.)  No Yes. Fill in the details.  Name of trust  Description and value of the property transferred  Date Transmade  Part 83:  List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units  Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, sold, moved, or transferred?  Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brohouses, pension funds, cooperatives, associations, and other financial institutions.  No Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Who else had access to it? Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Who else had access to it? Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, Cit | Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No |   |                        |                    |                 |                         |   |
| No   |   | Person Who Received Transfer<br>Address   | •                      |                    | payments        | received or debts       | Date transfer was made                        |
| Made  Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units  20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brohouses, pension funds, cooperatives, associations, and other financial institutions.  No Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Who else had access to it? Describe the contents Do you have it?  Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access Describe the contents Do you have it?  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access Describe the contents Do you have it? Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  Who else has or had access Describe the contents Do you have it? Address (Number, Street, City, State and ZIP Code)  | 19.   | ■ No  |                        |                    |                 |                         |   |
| Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brohouses, pension funds, cooperatives, associations, and other financial institutions.  No Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Financial Institution Who else had access to it? Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Who else had access to it? Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access Describe the contents Do you have it? Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  |   | Name of trust   | Description and va     | alue of the prope  | erty transferre | ed                      | Date Transfer was made                        |
| sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brohouses, pension funds, cooperatives, associations, and other financial institutions.  No Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  Last 4 digits of account or instrument closed, sold, moved, or transferred  Last 4 digits of instrument closed, sold, moved, or transferred  Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for sec cash, or other valuables?  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Who else had access to it? Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  Who else has or had access Describe the contents Do you Address (Number, Street, City, State Contents Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access Describe the contents Do you have it? Address (Number, Street, City, State Code)  Address (Number, Street, City, State Code)   | Par   | t 8: List of Certain Financial Accounts, Instru   | ıments, Safe Deposit   | Boxes, and Sto     | rage Units      |                         | ac  |
| Name of Financial Institution and Address (Number, Street, City, State and ZIP account number account number account number account or instrument account or instrument account was closed, sold, moved, or transferred account number account number account number account or instrument account or instrument account was closed, sold, moved, or transferred account or instrument | 20.   | sold, moved, or transferred? Include checking, savings, money market, or or houses, pension funds, cooperatives, associat  No | ther financial accoun  | ts; certificates o | of deposit; sh  |                         |   |
| No   Yes. Fill in the details.   Name of Financial Institution Address (Number, Street, City, State and ZIP Code)   Who else had access to it? Address (Number, Street, City, State and ZIP Code)   Address (Number, Street, City, State and ZIP Code)   Poscribe the contents   |   | Name of Financial Institution and La Address (Number, Street, City, State and ZIP ac  |                        |                    | clo<br>mo       | sed, sold,<br>eved, or  | Last balance<br>before closing or<br>transfer |
| ☐ Yes. Fill in the details.         Name of Financial Institution Address (Number, Street, City, State and ZIP Code)       Who else had access to it? Address (Number, Street, City, State and ZIP Code)       Describe the contents       Do you have it?         22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?       No       No       □ Yes. Fill in the details.         Name of Storage Facility Address (Number, Street, City, State and ZIP Code)       Who else has or had access to it? Address (Number, Street, City, Street, C  | 21.   | • •   | r before you filed for | bankruptcy, any    | / safe deposit  | box or other deposit    | ory for securities,                           |
| Address (Number, Street, City, State and ZIP Code)   |   | _ '''   |                        |                    |                 |                         |   |
| ■ No □ Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, C  |   |   | Address (Number, St    |                    | Describe the o  | contents                | Do you still have it?                         |
| ☐ Yes. Fill in the details.         Name of Storage Facility       Who else has or had access to it?       Describe the contents       Do you have it?         Address (Number, Street, City, State and ZIP Code)       Address (Number, Street, City,       Have it?  | 22.   | Have you stored property in a storage unit or p   | lace other than your   | home within 1 y    | ear before yo   | ou filed for bankruptcy | /?  |
| Address (Number, Street, City, State and ZIP Code) to it?  Address (Number, Street, City,  |   | _   |                        |                    |                 |                         |   |
| OLARE AND ZIF CODE   |   | •   | to it?                 |                    | Describe the (  | contents                | Do you still have it?                         |
|  |   |   |                        |                    |                 |                         |   |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Michelle O'Brien Case number (if known)

| Par                              | rt 9: Identify Property You Hold or Control for  | Someone Else  |                                      |                       |  |  |
|----------------------------------|--|---|--------------------------------------|-----------------------|--|--|
| 23.                              | Do you hold or control any property that someofor someone.   | one else owns? Include any proper   | ty you borrowed from, are storing fo | r, or hold in trust   |  |  |
|                                  | ■ No   |   |                                      |                       |  |  |
|                                  | Yes. Fill in the details.  |   |                                      |                       |  |  |
|                                  | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)   | Where is the property?<br>(Number, Street, City, State and ZIP<br>Code)   | Describe the property                | Value                 |  |  |
| Par                              | rt 10: Give Details About Environmental Informa  | ation   |                                      |                       |  |  |
| For                              | the purpose of Part 10, the following definitions  | apply:  |                                      |                       |  |  |
|                                  | Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these sul | ir, land, soil, surface water, ground                                     | <del>-</del> •                       |                       |  |  |
|                                  | Site means any location, facility, or property as to own, operate, or utilize it, including disposal   |   | law, whether you now own, operate,   | or utilize it or used |  |  |
|                                  | Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s  |   | s waste, hazardous substance, toxic  | substance,            |  |  |
| Rep                              | port all notices, releases, and proceedings that yo  | ou know about, regardless of wher   | n they occurred.                     |                       |  |  |
| 24.                              | Has any governmental unit notified you that you  | u may be liable or potentially liable                                     | under or in violation of an environm | ental law?            |  |  |
| ■ No □ Yes. Fill in the details. |  |   |                                      |                       |  |  |
|                                  | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State an<br>ZIP Code) | Environmental law, if you know it    | Date of notice        |  |  |
| 25.                              | Have you notified any governmental unit of any   | release of hazardous material?  |                                      |                       |  |  |
|                                  | ■ No □ Yes. Fill in the details.   |   |                                      |                       |  |  |
|                                  | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State an<br>ZIP Code) | Environmental law, if you know it    | Date of notice        |  |  |
| 26.                              | Have you been a party in any judicial or adminis   | strative proceeding under any envi  | ronmental law? Include settlements   | and orders.           |  |  |
|                                  | ■ No □ Yes. Fill in the details.   |   |                                      |                       |  |  |
|                                  | Case Title<br>Case Number  | Court or agency Name Address (Number, Street, City, State and ZIP Code)   | Nature of the case                   | Status of the case    |  |  |
| Par                              | rt 11: Give Details About Your Business or Con   | nections to Any Business  |                                      |                       |  |  |
| 27.                              | Within 4 years before you filed for bankruptcy,  | did you own a business or have ar   | y of the following connections to an | y business?           |  |  |
|                                  | ☐ A sole proprietor or self-employed in a t  | trade, profession, or other activity,                                     | either full-time or part-time        |                       |  |  |
|                                  | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)   |   |                                      |                       |  |  |
|                                  | ☐ A partner in a partnership   |   |                                      |                       |  |  |
|                                  | <u> </u>   | tive of a corporation   |                                      |                       |  |  |
|                                  | ☐ An officer, director, or managing execut   | ·   |                                      |                       |  |  |
|                                  | ☐ An owner of at least 5% of the voting or   | equity securities of a corporation  |                                      |                       |  |  |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

| Deb   | otor 1 Michelle O'Brien   | Cas   | e number (if known)   |  |
|---|---|---|---|--|
| ■ No. None of the above applies. Go to Part 12.  □ Yes. Check all that apply above and fill in the details below for each business.  Business Name  Describe the nature of the business  Employer Identification number |   |   |   |  |
|   | Business Name<br>Address<br>(Number, Street, City, State and ZIP Code)  | Describe the nature of the business  Name of accountant or bookkeeper | Employer Identification number Do not include Social Security number or ITIN.  Dates business existed           |  |
| 28.   | <ul> <li>28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.</li> <li>No</li> <li>Yes. Fill in the details below.</li> </ul> |   |   |  |
|   | Name<br>Address<br>(Number, Street, City, State and ZIP Code)   | Date Issued   |   |  |
| Par   | t 12: Sign Below  |   |   |  |
| are t<br>with<br>18 U   |   | false statement, concealing property, or ob                           | eclare under penalty of perjury that the answers staining money or property by fraud in connection rs, or both. |  |
| Mic   | chelle O'Brien<br>nature of Debtor 1  | Signature of Debtor 2   |   |  |
| Dat   | e <u>March 30, 2020</u>   | Date  |   |  |
| Did:<br>■ N<br>□ Y  |   | ent of Financial Affairs for Individuals Filing                       | for Bankruptcy (Official Form 107)?   |  |
| <b>■</b> N  | you pay or agree to pay someone who is not<br>o<br>es. Name of Person Attach the <i>Bankru</i>  |   |   |  |

| Fill in this inforn            | nation to identify your  | case:                 |  |                                      |
|--------------------------------|--|-----------------------|--|--------------------------------------|
| Debtor 1                       | Michelle O'Brien   |                       |  |                                      |
|                                | First Name   | Middle Name           | Last Name  |                                      |
| Debtor 2<br>Spouse if, filing) | First Name   | Middle Name           | Last Name  |                                      |
|                                |  |                       |  |                                      |
| Jnited States Bar              | nkruptcy Court for the:  | MIDDLE DISTRIC        | CT OF PENNSYLVANIA   |                                      |
| Case number                    |  |                       |  | ☐ Check if this is an amended filing |
| Official Fo                    |  |                       |  | _                                    |
| <u>Statemer</u>                | nt of Intentio   | n for Indiv           | /iduals Filing Under Chapt   | er 7 12/15                           |
| creditors have                 | ividual filing under cha<br>e claims secured by yo<br>ed personal property a | our property, or      |  |                                      |
| ou must file this              | s form with the court we<br>ever is earlier, unless the                      | vithin 30 days after  | you file your bankruptcy petition or by the date s<br>e time for cause. You must also send copies to the |                                      |
|                                | eople are filing togethe   | r in a joint case, bo | oth are equally responsible for supplying correct  | information. Both debtors must       |
|                                | and accurate as possib<br>our name and case nu                               |                       | s needed, attach a separate sheet to this form. Or   | n the top of any additional pages,   |
|                                | our Creditors Who Hav  |                       |  |                                      |
| -                              |  |                       |  |                                      |
| For any crediton be .          |  | art 1 of Schedule D   | Creditors Who Have Claims Secured by Proper  | ty (Official Form 106D), fill in the |
|                                | editor and the property t  | hat is collateral     | What do you intend to do with the property that  |                                      |
|                                |  |                       | secures a debt?  | as exempt on Schedule C?             |
| Creditor's                     |  |                       | ☐ Surrender the property.  | □No                                  |
| name:                          |  |                       | Retain the property and redeem it.   |                                      |
| Description of                 |  |                       | ☐ Retain the property and enter into a   | ☐ Yes                                |
| Description of property        |  |                       | Reaffirmation Agreement.   |                                      |
| securing debt:                 |  |                       | ☐ Retain the property and [explain]:   |                                      |
|                                |  |                       | _  |                                      |
| Creditor's                     |  |                       | ☐ Surrender the property.  | □ No                                 |
| name:                          |  |                       | Retain the property and redeem it.   | ☐ Yes                                |
| Description of                 |  |                       | ☐ Retain the property and enter into a<br>Reaffirmation Agreement.                                       | □ 169                                |
| property                       |  |                       | Retain the property and [explain]:   |                                      |
| securing debt:                 |  |                       |  |                                      |
| Crodite1-                      |  |                       |  | П.,                                  |
| Creditor's                     |  |                       | ☐ Surrender the property.  | □ No                                 |
| name:                          |  |                       | Retain the property and redeem it.   | ☐ Yes                                |
| Description of                 |  |                       | ☐ Retain the property and enter into a<br>Reaffirmation Agreement.                                       | <b>□</b> 169                         |
| property                       |  |                       | Retain the property and [explain]:   |                                      |
| securing debt:                 |  |                       | — Notain the property and [explain].   |                                      |
|                                |  |                       |  |                                      |
| Creditor's                     |  |                       | ☐ Surrender the property.  | □ No                                 |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 1

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| Debtor 1 Michelle O'Brien   | Case number (if kno   | own)                            |
|---|---|---------------------------------|
| name:   | <ul><li>☐ Retain the property and redeem it.</li><li>☐ Retain the property and enter into a</li></ul> | ☐ Yes                           |
| Description of  | Reaffirmation Agreement.  |                                 |
| property  | ☐ Retain the property and [explain]:  |                                 |
| securing debt:  |   | <u> </u>                        |
| Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed        | d in Schedule G: Executory Contracts and Unexp  |                                 |
| in the information below. Do not list real estate leases. U<br>You may assume an unexpired personal property lease if |   |                                 |
| Describe your unexpired personal property leases  |   | Will the lease be assumed?      |
| Lessor's name:  |   | □ No                            |
| Description of leased Property:   |   | ☐ Yes                           |
| Lessor's name:  |   | □ No                            |
| Description of leased   |   | L NO                            |
| Property:   |   | ☐ Yes                           |
| Lessor's name:  |   | □ No                            |
| Description of leased Property:   |   | ☐ Yes                           |
| Lessor's name:  |   | □ No                            |
| Description of leased   |   |                                 |
| Property:   |   | ☐ Yes                           |
| Lessor's name:  |   | □ No                            |
| Description of leased Property:   |   | ☐ Yes                           |
| Lessor's name:  |   | □ No                            |
| Description of leased Property:   |   | ☐ Yes                           |
| Lessor's name:  |   |                                 |
| Description of leased   |   | □ No                            |
| Property:   |   | ☐ Yes                           |
| Part 3: Sign Below  |   |                                 |
| Under penalty of perjury, I declare that I have indicated moroperty that is subject to an unexpired lease.            | ny intention about any property of my estate that   | secures a debt and any personal |
| X /s/ Michelle O'Brien  | X   |                                 |
| Michelle O'Brien  | Signature of Debtor 2   |                                 |
| Signature of Debtor 1   |   |                                 |
| •   |   |                                 |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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| Fill i         | n this information to identify your case:   |                    | Ch                                  | eck one box                    | only as d      | irected in this form and                                 | l in Form                       |
|----------------|---|--------------------|-------------------------------------|--------------------------------|----------------|--|---------------------------------|
| Deb            | ·   |                    |                                     | 2A-1Supp:                      | orny as a      |  |                                 |
|                | tor 2   |                    |                                     |                                |                |  |                                 |
|                | ise, if filing)   |                    |                                     | ■ 1. There                     | is no pres     | umption of abuse   |                                 |
| Unit           | ed States Bankruptcy Court for the: Middle District of Pennsylva  | ınia               |                                     |                                |                | o determine if a presur<br>nade under <i>Chapter 7 l</i> |                                 |
| Cas            | e number  |                    |                                     |                                |                | cial Form 122A-2).                                       | viearis rest                    |
| (if kno        |   |                    |                                     |                                |                | does not apply now be service but it could ap            |                                 |
|                |   |                    |                                     | ☐ Check i                      | f this is a    | n amended filing   |                                 |
| Off            | icial Form 122A - 1   |                    |                                     |                                |                |  |                                 |
| Ch             | apter 7 Statement of Your Current   | Mor                | nthly Inc                           | ome                            |                |  | 12/19                           |
| attacl<br>case | complete and accurate as possible. If two married people are filing to a separate sheet to this form. Include the line number to which the a number (if known). If you believe that you are exempted from a presurying military service, complete and file Statement of Exemption from 1: Calculate Your Current Monthly Income | ddition<br>mption  | nal information a of abuse becau    | applies. On the                | ne top of aint | ny additional pages, writ<br>narily consumer debts o     | e your name and<br>r because of |
| 1.             | What is your marital and filing status? Check one only.   |                    |                                     |                                |                |  |                                 |
|                | ■ Not married. Fill out Column A, lines 2-11.   |                    |                                     |                                |                |  |                                 |
|                | ☐ Married and your spouse is filing with you. Fill out both Co  | olumns             | A and B, lines                      | 2-11.                          |                |  |                                 |
|                | ☐ Married and your spouse is NOT filing with you. You and   |                    |                                     |                                |                |  |                                 |
|                | ☐ Living in the same household and are not legally separ  | ated.              | ·<br>Fill out both Co               | lumns A and                    | B, lines 2     | 2-11.  |                                 |
|                | ☐ Living separately or are legally separated. Fill out Colum penalty of perjury that you and your spouse are legally sep living apart for reasons that do not include evading the Me.   | arated             | d under nonbar                      | kruptcy law                    | that applie    | es or that you and your                                  |                                 |
| 10<br>th       | Il in the average monthly income that you received from all sources, of 1(10A). For example, if you are filing on September 15, the 6-month periode 6 months, add the income for all 6 months and divide the total by 6. Fill incomes own the same rental property, put the income from that property in contents.              | d would<br>the res | be March 1 throsult. Do not include | ugh August 31<br>de any income | . If the amo   | ount of your monthly incomore than once. For examp       | ne varied during<br>le, if both |
|                |   |                    |                                     | Column A Debtor 1              |                | Column B Debtor 2 or non-filing spouse                   |                                 |
| 2.             | Your gross wages, salary, tips, bonuses, overtime, and compayroll deductions).  | missic             | ons (before all                     | \$                             | 0.00           | \$   |                                 |
| 3.             | <b>Alimony and maintenance payments.</b> Do not include payments Column B is filled in.   | s from             | a spouse if                         | \$                             | 0.00           | \$   |                                 |
| 4.             | All amounts from any source which are regularly paid for ho of you or your dependents, including child support. Include r from an unmarried partner, members of your household, your dependent roommates. Include regular contributions from a spouse only filled in. Do not include payments you listed on line 3.             | regular<br>pender  | contributions<br>nts, parents,      | \$                             | 0.00           | \$   |                                 |
| 5.             | Net income from operating a business, profession, or farm   | D.I.               | 1 4                                 |                                |                |  |                                 |
|                | Gross receipts (before all deductions) \$   | 0.00               | tor 1                               |                                |                |  |                                 |
|                | Cross receipts (perore all deddelloris)   | 0.00               |                                     |                                |                |  |                                 |
|                |   |                    | Copy here ->                        | \$                             | 0.00           | \$   |                                 |
| 6.             | Net income from rental and other real property  |                    | .,                                  |                                |                |  |                                 |
| .              | and care property   | Deb                | otor 1                              |                                |                |  |                                 |
|                | Closs receipts (before all deductions)  | 0.00               |                                     |                                |                |  |                                 |
|                | ——————————————————————————————————————  | 0.00               |                                     |                                |                |  |                                 |
|                | Net monthly income from rental or other real property \$  | 0.00               | Copy here ->                        |                                | 0.00           | \$   |                                 |
| 7.             | Interest, dividends, and royalties  |                    |                                     | \$                             | 0.00           | \$   |                                 |

Official Form 122A-1

**Chapter 7 Statement of Your Current Monthly Income** 

page 1

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Official Form 122A-1

**Chapter 7 Statement of Your Current Monthly Income** 

page 2

Signature of Debtor 1

Date March 30, 2020

| Debtor 1 | Michelle O'Brien | Case number (if known) |  |
|----------|------------------|------------------------|--|
|          | MM / DD / VVVV   |                        |  |

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

## This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapte   | r 7:  | Liquidation        |
|----------|-------|--------------------|
|          | \$245 | filing fee         |
|          | \$75  | administrative fee |
| <u>+</u> | \$15  | trustee surcharge  |
|          | \$335 | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

Desc

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Desc

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

## Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

## United States Bankruptcy Court Middle District of Pennsylvania

| In re  | Michelle O'Brien   | ·   | Case N                                    | 0.                       |                    |  |
|--------|--|---|---|--------------------------|--------------------|--|
|        |  | Debtor(s)   | Chapte                                    | <b>7</b>                 |                    |  |
|        | DISCLOSURE OF COMPENSA   | TION OF ATTOI   | RNEY FOR                                  | DEBTOR(S)                |                    |  |
| (      | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: |   |   |                          |                    |  |
|        | For legal services, I have agreed to accept  |   | \$  | 1,200.00                 |                    |  |
|        | Prior to the filing of this statement I have received  |   | \$  | 1,200.00                 |                    |  |
|        | Balance Due  |   | \$  | 0.00                     |                    |  |
| 2. 7   | The source of the compensation paid to me was:   |   |   |                          |                    |  |
|        | $\blacksquare$ Debtor $\square$ Other (specify):   |   |   |                          |                    |  |
| 3.     | The source of compensation to be paid to me is:  |   |   |                          |                    |  |
|        | ■ Debtor □ Other (specify):  |   |   |                          |                    |  |
| 4.     | I have not agreed to share the above-disclosed compensation  | on with any other person                                | unless they are m                         | embers and associate     | es of my law firm. |  |
|        | ☐ I have agreed to share the above-disclosed compensation v copy of the agreement, together with a list of the names of  |   |   |                          | ny law firm. A     |  |
| 5.     | In return for the above-disclosed fee, I have agreed to render le  | egal service for all aspect                             | s of the bankrupto                        | y case, including:       |                    |  |
| l<br>C | <ul> <li>Analysis of the debtor's financial situation, and rendering a</li> <li>Preparation and filing of any petition, schedules, statement</li> <li>Representation of the debtor at the meeting of creditors and</li> <li>[Other provisions as needed]</li> <li>Preparation of Chapter 7 Bankruptcy; Filing of</li> </ul>  | of affairs and plan which<br>d confirmation hearing, an | n may be required;<br>and any adjourned l | nearings thereof;        |                    |  |
|        | Meeting of Creditors; Filing Pre/Post Bankrup  |   |   |                          |                    |  |
| 5. l   | By agreement with the debtor(s), the above-disclosed fee does Excludes Filing Amended Schedules due to c \$150.00 per hour.  Excludes Filing to Discharge Judgments- Filing  | client error - Filing An                                | nended Schedu                             |                          | e rate of          |  |
|        | CE   | RTIFICATION   |   |                          |                    |  |
|        | certify that the foregoing is a complete statement of any agreeankruptcy proceeding.   | ement or arrangement for                                | payment to me for                         | or representation of the | ne debtor(s) in    |  |
|        | arch 30, 2020<br>ate   | /s/ Robert M. Ree<br>Robert M. Reedy                    |   |                          |                    |  |
|        |  | Signature of Attorne REEDY LAW OFF                      | ICE                                       |                          |                    |  |
|        |  | 7 East Main Stree P.O. Box 334                          | et  |                          |                    |  |
|        |  | Schuylkill Haven  |   |                          |                    |  |
|        |  | 570-385-9110 Fa   |   |                          |                    |  |
|        |  | Name of law firm  | Z.Som, maywer                             | oci waoi.com             |                    |  |
|        |  |   |   |                          |                    |  |

## United States Bankruptcy Court Middle District of Pennsylvania

| In re  | Michelle O'Brien                |   | Case No.           |                       |  |
|--------|---------------------------------|---|--------------------|-----------------------|--|
|        |                                 | Debtor(s)   | Chapter            | 7                     |  |
|        |                                 | RIFICATION OF CREDITOR I                              |                    |                       |  |
| ine ab | ove-named Deotor nereby verifie | es that the attached list of creditors is true and co | orrect to the best | or his/her knowledge. |  |
| Date:  | March 30, 2020                  | /s/ Michelle O'Brien                                  |                    |                       |  |
|        |                                 | Michelle O'Brien                                      |                    |                       |  |
|        |                                 | Signature of Debtor                                   |                    |                       |  |